## AMENDED FILING EXPLANATION

This page is required to be updated/completed any time an amended filing is creat	ted.



# **ANNUAL STATEMENT**

For the Year Ended December 31, 2008

of the Condition and Affairs of the

# MAMSI Life and Health Insurance Company NAIC Group Code.....0707, 0707 NAIC Company Code..... 60321 Employer's ID Number..... 52-1803283

(Current Period) (Prior Perio	od)		. ,
Organized under the Laws of Maryland	State of Domicile or Po		Country of Domicile US
Licensed as Business TypeLife, Accident		Is HMO Federally Qualified?	
Incorporated/Organized September 12		Commenced Business N	ovember 1, 1955
Statutory Home Office	4 Taft Court Rockville M (Street and Number) (City or Tow	ID 20850 m, State and Zip Code)	
Main Administrative Office	4 Taft Court Rockville M (Street and Number) (City or Tow	ID 20850 vn, State and Zip Code)	301-762-8205 (Area Code) (Telephone Number)
Mail Address	4 Taft Court Rockville M (Street and Number or P. O. Box)	D 20850	(rica coas) (religione number)
Primary Location of Books and Records	, , , ,	n, State and Zip Code)	301-294-1578 (Area Code) (Telephone Number)
Internet Web Site Address	www.mamsiunitedhealthcare.co	om	004.004.4570
Statutory Statement Contact	Karen Ann Cuddy (Name)		301-294-1578 (Area Code) (Telephone Number) (Extension)
	kcuddy@uhc.com (E-Mail Address)		(Fax Number)
	,	CERS	( an italias)
Name	Title	Name	Title
James Patrick Cronin Jr. #	President and CEO	Juanita Valarae Bolland Luis	Assistant Secretary
Nyle Brent Cottington #	Vice President, Regulatory Controlle and Assistant Treasurer	er	
	OTI	HER	
Vera Cermin Dvorak M.D.	Executive Vice President, Medical D		
Craig Charles Anderson #	Vice President, Chief Financial Office		,
Julie Michelle Darling Jeffrey Donald Alter #	Assistant Secretary Chairman	John Dominick DeRos	a Vice President
territy boriaid rater #		OR TRUSTEES	
	le Brent Cottington #	John Dominick DeRosa	Patricia Anne Bowen #
Craig Charles Anderson # Ve Karen Ann Cuddy	ra Cermin Dvorak M.D.	Mark Henry Smith	Sanford Paul Cohen #
State of Maryland	State of Minnesota		State of Minnesota
County of Montgomery	County of Hennepin		County of Hennepin
stated above, all of the herein described assets herein stated, and that this statement, together of all the assets and liabilities and of the condition therefrom for the period ended, and have been manual except to the extent that: (1) state law in procedures, according to the best of their informincludes the related corresponding electronic filing may be accepted to the procedures. The electronic filing may be	with related exhibits, schedules and e on and affairs of the said reporting en completed in accordance with the NA nay differ; or, (2) that state rules or re- nation, knowledge and belief, respecti- ng with the NAIC, when required, tha	explanations therein contained, ann tity as of the reporting period stated IC Annual Statement Instructions a gulations require differences in reported. Furthermore, the scope of this an exact copy (except for formatics)	exed or referred to, is a full and true statement d above, and of its income and deductions and Accounting Practices and Procedures orting not related to accounting practices and s attestation by the described officers also attended to the differences due to electronic filing) of the
(Signature)	(Sign		(Signature)
James Patrick Cronin Jr.  1. (Printed Name)	Juanita Valarae 2. (Printe		Nyle Brent Cottington 3. (Printed Name)
President and CEO	,	,	ce President, Regulatory Controller and Assistant Treasure
(Title)	(Ti	tle)	(Title)
Subscribed and sworn to before me	Subscribed and sworn to b	efore me Subs	scribed and sworn to before me
This day of			s day of
		· · · · · · · · · · · · · · · · · · ·	o
	a. Is ti	nis an original filing?	Yes [X] No [ ]
	b. If no	o: 1. State the amendment number	
	•	Date filed	
		Z. Date illeu	

3. Number of pages attached



### LIFE SUPPLEMENTS

(To Be Filed by March 1)

# For the Year Ended December 31, 2008 Of the.....MAMSI Life and Health Insurance Company

ADDRESS .....Rockville MD 20850

NAIC Group Code.....0707

NAIC Company Code.....60321 Employer's ID Number.....52-1803283

# Supplement for the year 2008 of the MAMSI Life and Health Insurance Company EXHIBIT 5 - AGGREGATE RESERVE FOR LIFE CONTRACTS

	·	• · · · ·		<u> </u>	
1	2	3	4	5	6
				Credit	
				(Group and	
Valuation Standard	Total	Industrial	Ordinary	Individual)	Group
Life Insurance:					
0100001. Unearned Premiums	4,285				4,285
0100002. Policy Reserves	26,794		26,794		
0100003. Premium Reserves	79,548		79,548		
0199997 Totals (Gross)	110,627	0	106,342	0	4,285
0199999. Totals (Net)	110,627	0	106,342	0	4,285
Miscellaneous Reserves:				_	_
0700001. IPC	603		603		
0799997 Totals (Gross)	603	0	603	0	0
0799999. Totals (Net)	603	0	603	0	0
9999999. Totals (Net) - Page 3, Line 1	111,230	0	106,945	0	4,285

Supplement for the year 2008 of the MAMSI Life and Health Insurance Company EXHIBIT 5 - INTERROGATORIES

7.4 Identify where the reserves are reported in the blank.

	Has the reporting entity ever issued both participating and non-participating contracts?  If not, state which kind is issued non-participating	Yes [ ]	No [X]
	Does the reporting entity at present issue both participating and non-participating contracts?	Yes [ ]	No [X]
2.2	If not, state which kind is issued non-participating		
3.	Does the reporting entity at present issue or have in force contracts that contain non-guaranteed elements?	Yes [ ]	No[X]
	If so, attach a statement that contains the determination procedures, answers to the interrogatories and an actuarial opinion as		
	described in the instructions.		
4.	Has the reporting entity any assessment or stipulated premium contracts in force? If so, state:	Yes [ ]	No[X]
	4.1 Amount of insurance:	\$	
	4.2 Amount of reserve:	\$	
	4.3 Basis of reserve:		
	4.4 Basis of regular assessments:		
	<ul><li>4.5 Basis of special assessments:</li><li>4.6 Assessments collected during the year:</li></ul>	¢	
5	If the contract loan interest rate guaranteed in any one or more of its currently issued contracts is less than 5 %, not in advance, state the	φ	
٥.	contract loan rate guarantees on any such contracts.		
	oontaat loan tato gaarantooo on any ocon contaato.		
6.	Does the reporting entity hold reserves for any annuity contracts that are less than the reserves that would be held on a standard basis?	Yes [ ]	No[X]
	6.1 If so, state the amount of reserve on such contracts on the basis actually held:	\$	
	6.2 That would have been held (on an exact or approximate basis) using the actual ages of the annuitants; the interest rate(s) used in 6.1; and		
	the same mortality basis used by the reporting entity for the valuation of comparable annuity benefits issued to standard lives. If the reporting entity		
	has no comparable annuity benefits for standard lives to be valued, the mortality basis shall be the table most recently approved by the	•	
	state of domicile for valuing individual annuity benefits:	\$	
7	Attach statement of methods employed in their valuation.  Does the reporting entity have any Synthetic GIC contracts, or agreements in effect as of December 31 of the current year?	Yes[]	No [X]
١.	7.1 If yes, state the total dollar amount of assets covered by these contracts or agreements:	\$	
	7.2 Specify the basis (fair value, amortized cost, etc.) for determining the amount:	Ψ	
	.,,		
	7.3 State the amount of reserves established for this business:	\$	

# Ex. 7-Deposit-Type Contracts NONE

Sch. S-Pt. 1-Sn. 1 NONE

Sch. S-Pt. 3-Sn. 1 NONE

DIRECT BUSINESS IN THE STATE OF

NAIC Company Code.....60321

NAIC Group Code.....0707

#### LIFE INSURANCE

		LIFE INSUR	MINCL			
		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	Ordinary	marriadary	Огоар	madotrar	1000
1	Life insurance					0
2	Annuity considerations					0
3.	Deposit-type contract funds		XXX		XXX	0
4	Other considerations.					0
5.	Totals (Sum of Lines 1 to 4)		0	0	0	0
0.	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					0
-	Applied to provide paid-up additions or shorten the endowment					
0.0						0
6.4	Other					0
6.5	or premium-paying period Other Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0
	Annuities:		•		•	
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits					0
10.	Matured endowments					0
11.	Annuity benefits					0
12.	Surrender values and withdrawals for life contracts					0
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health					0
15.	Totals	0	0	0	0	0
<u></u>		DETAII S	OF WRITE-INS			I
1301.		22171120				0
1302						0
						0
	Summary of remaining write-ins for Line 13 from overflow page	0	0		0	0
	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)		0	0	0	0
		1				

	Ordinary		(	Credit Life		Group	Industrial			Total
			(Group and Individual)							
	1	2	3	4	5	6	7	8	9	10
			No. of Ind.							
	NI-	A 4	Pols. & Gr.	A 4	No. of	A	NI-	A 4	NI-	A t
DIDEAT DEATH DENESTO AND	No.	Amount	Certifs.	Amount	Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND										
MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year									0	0
17. Incurred during current year									0	0
Settled during current year:										
18.1 By payment in full									0	0
18.2 By payment on compromised claims.									0	0
18.2 By payment on compromised claims. 18.3 Totals paid	0	0		0	<u></u> 0	0	0	0	0	0
18.4 Reduction by compromise					<u></u>				0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year										
(Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year				(a)					0	0
21. Issued during year									0	0
22. Other changes to in force (Net)									0	0
23. In force December 31 of current year	0	0	0	(a)0	0	0	0	0	0	0

(a) Includes Individual Credit Life Insurance, prior year \$.........0 current year \$........0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$........0 current year \$........0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$.........0 current year \$........0.

	1	2	2	1	5
	'	2	Dividends Paid Or	Direct	J
	D' t	D'and Daniel and		Direct	D'
	Direct	Direct Premiums	Credited on Direct	Losses	Direct Losses
	Premiums	Earned	Business	Paid	Incurred
24. Group policies (b)					
24.1 Federal Employee Health Benefits Program premium (b)					
24.2 Credit (group and individual)					
24.3 Collectively renewable policies (b)					
Other Individual Policies:		Y L			
25.1 Non-cancelable (b)					
OF O Comments and announce last (h)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)		0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 2.4 + 25.6)	0	0	0	0	0

<sup>(</sup>b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

\* 6 0 3 2 1 2 0 0 8 2 0 6 0 4 1 0 5 \*

ARKANSAS DURING THE YEAR

DIRECT BUSINESS IN THE STATE OF

NAIC Group Code.....0707

NAIC Company Code.....60321

#### LIFE INSURANCE

			/ 1110L			
		1	2	3	4	5
			Credit Life			
		Ordinani	(Group and	Croun	Industrial	Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	Ordinary	Individual)	Group	Industrial	Total
1						0
2.	Life insurance Annuity considerations					0
	,		XXX		XXX	0
3.	Deposit-type contract funds					0
4.	Other considerations					0
5.	Totals (Sum of Lines 1 to 4)  DIRECT DIVIDENDS TO POLICYHOLDERS	0	0	U	U	U
C 4	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					0
6.3	Applied to provide paid-up additions or shorten the endowment					
0.4	or premium-paying period		· · · · · · · · · · · · · · · · · · ·			0
6.4	or premium-paying period					0
6.5	. 516.15 (54.11.5. 2.11.55 51.1)		0	0	0	0
- 4	Annuities:					
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits					0
10.	Matured endowments					0
11.	Annuity benefits					0
12.	Surrender values and withdrawals for life contracts					0
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0
14.	All other benefits, except accident and health					0
15.	Totals	1		0	0	0
		DETAILS	OF WRITE-INS	· ·		<b>1</b>
1301.						0
1302.						0
1303.						0
	Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary			Credit Life Group		Group	Inc	dustrial	Total	
			(Group	and Individual)						
	1	2	3	4	5	6	7	8	9	10
			No. of Ind.							
			Pols. & Gr.		No. of					
	No.	Amount	Certifs.	Amount	Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND										
MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year									0	0
17. Incurred during current year									0	0
Settled during current year:										
18.1 By payment in full									0	0
18.2 By payment on compromised claims.									0	0
18.1 By payment in full	0	0		0	<u></u> 0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year										
(Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year				(a)					0	0
21. Issued during year									0	0
22. Other changes to in force (Net)									0	0
23. In force December 31 of current year	0	0	0	(a)0	0	0	0	0	0	0

(a) Includes Individual Credit Life Insurance, prior year \$.........0 current year \$........0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$........0 current year \$........0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$.........0 current year \$........0.

	1	2	3	4	5
			Dividends Paid Or	Direct	
	Direct	Direct Premiums	Credited on Direct	Losses	Direct Losses
	Premiums	Earned	Business	Paid	Incurred
24. Group policies (b)					
24.1 Federal Employee Health Benefits Program premium (b)(b)					
24.2 Credit (group and individual)					
24.3 Collectively renewable policies (b)					
Other Individual Policies:		Y L			
25.1 Non-cancelable (b)					
OF O Consented and an acceptable (b)					
OF 2. New research is few stated as a series (h)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)		0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 2.4 + 25.6)		0	0	0	0

<sup>(</sup>b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

DIRECT BUSINESS IN THE STATE OF NAIC Group Code.....0707

NAIC Company Code.....60321

#### LIFE INSURANCE

		1	2	3	4	5
		Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	Granary	marriadary	Group	maddia	1000
1	Life insurance					0
2.						0
3.	Deposit-type contract funds		XXX		XXX	0
4.	Other considerations					0
5.		0	0	0	0	0
-	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	·				***************************************	0
6.3	Applied to provide paid-up additions or shorten the endowment					
	or premium-paving period					0
6.4	Other	RITTR			***************************************	0
6.5	or premium-paying period		0	0	0	0
0.0	Annuities:					
7.1	Paid in cash or left on deposit					0
7.2	•					0
7.3	Other				***************************************	0
7.4	Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
-	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits					0
10.	Matured endowments					0
11.	Annuity benefits					0
12.	Surrender values and withdrawals for life contracts					0
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health					0
	Totals			0	0	0
10.	Totalo					
1301		DETAILS	OF WRITE-INS			^
1301.						0
						0
	C					0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	(	Ordinary	(	Credit Life		Group	In	dustrial		Total
			(Group	and Individual)						
	1	2	3	4	5	6	7	8	9	10
			No. of Ind.							
			Pols. & Gr.		No. of					
	No.	Amount	Certifs.	Amount	Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND										
MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year									0	0
17. Incurred during current year									0	0
Settled during current year:										
18.1 By payment in full									0	0
18.2 By payment on compromised claims.									0	0
18.3 Totals paid	0	0		0	0	0	0	0	0	0
18.3 Totals paid									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year										
(Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year				(a)					0	0
21. Issued during year									0	0
22. Other changes to in force (Net)									0	0
23. In force December 31 of current year	0	0	0	(a)0	0	0	0	0	0	0

(a) Includes Individual Credit Life Insurance, prior year \$.........0 current year \$........0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$........0 current year \$........0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$.........0 current year \$........0.

	1	2	2	1	5
	'	2	Dividends Paid Or	Direct	J
	D' t	D'and Daniel and		Direct	D'
	Direct	Direct Premiums	Credited on Direct	Losses	Direct Losses
	Premiums	Earned	Business	Paid	Incurred
24. Group policies (b)					
24.1 Federal Employee Health Benefits Program premium (b)					
24.2 Credit (group and individual)					
24.3 Collectively renewable policies (b)					
Other Individual Policies:		Y L			
25.1 Non-cancelable (b)					
OF O Comments and announce last (h)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)		0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 2.4 + 25.6)	0	0	0	0	0

<sup>(</sup>b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

\* 6 0 3 2 1 2 0 0 8 2 0 6 0 5 1 0 5 \* CALIFORNIA DURING THE YEAR

DIRECT BUSINESS IN THE STATE OF

NAIC Group Code.....0707

NAIC Company Code.....60321

#### LIFE INSURANCE

	LII L INSUNANCE										
		1	2	3	4	5					
			Credit Life								
		Ordinani	(Group and	Croun	Industrial	Total					
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	Ordinary	Individual)	Group	Industrial	Total					
1						0					
2.	Life insurance Annuity considerations					0					
	,		XXX		XXX	0					
3.	Deposit-type contract funds					0					
4.	Other considerations					0					
5.	Totals (Sum of Lines 1 to 4)  DIRECT DIVIDENDS TO POLICYHOLDERS	0	0	U	U	U					
C 4	Life insurance:										
6.1	Paid in cash or left on deposit					0					
6.2	Applied to pay renewal premiums					0					
6.3	Applied to provide paid-up additions or shorten the endowment										
0.4	or premium-paying period		· · · · · · · · · · · · · · · · · · ·			0					
6.4	or premium-paying period					0					
6.5	. 516.15 (54.11.5. 2.11.55 51.1)		0	0	0	0					
- 4	Annuities:										
7.1	Paid in cash or left on deposit					0					
7.2	Applied to provide paid-up annuities					0					
7.3	Other					0					
7.4	Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0					
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0					
	DIRECT CLAIMS AND BENEFITS PAID										
9.	Death benefits					0					
10.	Matured endowments					0					
11.	Annuity benefits					0					
12.	Surrender values and withdrawals for life contracts					0					
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0					
14.	All other benefits, except accident and health					0					
15.	Totals	1		0	0	0					
		DETAILS	OF WRITE-INS	· ·		<b>1</b>					
1301.						0					
1302.						0					
1303.						0					
	Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0					
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0					

	(	Ordinary		Credit Life		Group	Inc	dustrial		Total
			(Group	and Individual)						
	1	2	3	4	5	6	7	8	9	10
			No. of Ind.							
			Pols. & Gr.		No. of					
	No.	Amount	Certifs.	Amount	Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND										
MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year									0	0
17. Incurred during current year									0	0
Settled during current year:										
18.1 By payment in full									0	0
18.2 By payment on compromised claims.									0	0
18.1 By payment in full	0	0		0	<u></u> 0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year										
(Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year				(a)					0	0
21. Issued during year									0	0
22. Other changes to in force (Net)									0	0
23. In force December 31 of current year	0	0	0	(a)0	0	0	0	0	0	0

(a) Includes Individual Credit Life Insurance, prior year \$.........0 current year \$........0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$........0 current year \$........0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$.........0 current year \$........0.

	1	2	3	4	5
			Dividends Paid Or	Direct	
	Direct	Direct Premiums	Credited on Direct	Losses	Direct Losses
	Premiums	Earned	Business	Paid	Incurred
24. Group policies (b)					
24.1 Federal Employee Health Benefits Program premium (b)(b)					
24.2 Credit (group and individual)					
24.3 Collectively renewable policies (b)					
Other Individual Policies:		Y L			
25.1 Non-cancelable (b)					
OF O Consented and an acceptable (b)					
OF 2. New research is few stated as a series (h)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)		0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 2.4 + 25.6)		0	0	0	0

<sup>(</sup>b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.



DIRECT BUSINESS IN THE STATE OF

NAIC Group Code.....0707

NAIC Company Code.....60321

#### LIFE INSURANCE

LII E INSURANCE											
		1	2	3	4	5					
			Credit Life								
		Ordinani	(Group and Individual)	Croun	la di satri al	Total					
	DIDECT DEFMINING AND ANNUITY CONCIDED ATIONS	Ordinary	individual)	Group	Industrial	Total					
1	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS Life insurance					0					
1.						0					
2.	Annuity considerations		XXX		XXX	0					
3.	Deposit-type contract funds					0					
4.	Other considerations					0					
5.	Totals (Sum of Lines 1 to 4)	0	0	0	0	0					
	DIRECT DIVIDENDS TO POLICYHOLDERS										
	Life insurance:					_					
6.1	Paid in cash or left on deposit					0					
6.2	Applied to pay renewal premiums					0					
6.3	Applied to provide paid-up additions or shorten the endowment					_					
	or premium-paying period					0					
6.4	or premium-paying period		<b>\</b>			0					
6.5	Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0					
	Annuities:										
7.1	Paid in cash or left on deposit					0					
7.2	Applied to provide paid-up annuities					0					
7.3	Other					0					
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0					
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0					
	DIRECT CLAIMS AND BENEFITS PAID										
9.	Death benefits					0					
10.	Matured endowments					0					
11.	Annuity benefits					0					
12.	Surrender values and withdrawals for life contracts					0					
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0					
14.	All other benefits, except accident and health					0					
15.	Totals	0	0	0	0	0					
		DETAILS	OF WRITE-INS								
1301		BETAILO	J			0					
1302						0					
1303						0					
	Summary of remaining write-ins for Line 13 from overflow page		0	0	0	n					
1390	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	n		n	0	n					
1000	Total Lines 1907 tillu 1909 plus 1930/Line 19 above/				0	U					

	(	Ordinary		Credit Life and Individual)		Group	In	dustrial		Total
	1	2	3	4	5	6	7	8	9	10
			No. of Ind.			-				-
			Pols. & Gr.		No. of					
	No.	Amount	Certifs.	Amount	Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND										
MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year									0	0
17. Incurred during current year									0	0
Settled during current year:										
18.1 By payment in full									0	0
18.2 By payment on compromised claims.			<u></u>						0	0
18.1 By payment in full	0	0		0	0	0	0	0	0	0
18.4 Reduction by compromise				V ()					0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
<ol><li>Unpaid Dec. 31, current year</li></ol>										
(Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year				(a)					0	0
21. Issued during year									0	0
22. Other changes to in force (Net)									0	0
23. In force December 31 of current year	0	0	0	(a)0	0	0		0	0	0

(a) Includes Individual Credit Life Insurance, prior year \$.........0 current year \$........0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$........0 current year \$........0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$.........0 current year \$........0.

	1	2	3	4	5
			Dividends Paid Or	Direct	
	Direct	Direct Premiums	Credited on Direct	Losses	Direct Losses
	Premiums	Earned	Business	Paid	Incurred
24. Group policies (b)					
24.1 Federal Employee Health Benefits Program premium (b)					
24.2 Credit (group and individual)					
24.3 Collectively renewable policies (b)					
24.3 Collectively renewable policies (b)					
Other Individual Policies:		Y L			
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)		0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 2.4 + 25.6)		0	0	0	0

<sup>(</sup>b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

\* 6 0 3 2 1 2 0 0 8 2 0 6 0 9 1 0
DIRECT BUSINESS IN THE STATE OF DISTRICT OF COLUMBIA DURING THE YEAR

ICT OF COLUMBIA DURING THE YEAR NAIC Company Code.....60321

NAIC Group Code.....0707

#### LIFE INSURANCE

	•		1110			
		1	Credit Life (Group and	3	4	5 Total
	DIDECT DEFMILING AND ANNUITY CONCIDED ATIONS	Ordinary	Individual)	Group	Industrial	lotai
4	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS			109.516		109.516
1.	Life insurance			,		,-
2.	Annuity considerations					0
3.	Deposit-type contract funds					0
4.	Other considerations					0
5.	Totals (Sum of Lines 1 to 4)	0	0	109,516	0	109,516
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					0
6.3	Applied to provide paid-up additions or shorten the endowment					
	or premium-paying period					0
6.4	Other					0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits			54,488		54,488
10.	Matured endowments					0
11.	Annuity benefits					0
12.	Surrender values and withdrawals for life contracts					00
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0
14.	All other benefits, except accident and health					00
	Totals	0			0	54,488
			OF WRITE-INS			,,,,,,
1301.				j		0
1301.						
						0
1303.	Summary of remaining write-ins for Line 13 from overflow page				0	]0
						0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	l0

	(	Ordinary	Credit Life			Group	In	dustrial		Total
			(Group	and Individual)						
	1	2	3	4	5	6	7	8	9	10
			No. of Ind.							
			Pols. & Gr.		No. of					
	No.	Amount	Certifs.	Amount	Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND										
MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year					6	119,523			6	119,523
17. Incurred during current year					2	49,999			2	49,999
Settled during current year:										
18.1 By payment in full									0	0
18.1 By payment in full									0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year										
(Lines 16 + 17 - 18.6)	0	0	0	0	8	169,522	0	0	8	169,522
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year				(a)		22,107,003			259	22,127,003
21. Issued during year									0	0
22. Other changes to in force (Net)									(132)	(12,844,725)
23. In force December 31 of current year	1	20,000	0	(a)0	126	9,262,278	0	0	127	9,282,278

(a) Includes Individual Credit Life Insurance, prior year \$.........0 current year \$........0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$........0 current year \$........0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$.........0 current year \$........0.

	1	2	3	4	5
			Dividends Paid Or	Direct	
	Direct	Direct Premiums	Credited on Direct	Losses	Direct Losses
	Premiums	Earned	Business	Paid	Incurred
24. Group policies (b)					
24.1 Federal Employee Health Benefits Program premium (b)					
24.2 Credit (group and individual)					
24.3 Collectively renewable policies (b)					
24.3 Collectively renewable policies (b)					
Other Individual Policies:		Y L			
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)		0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 2.4 + 25.6)		0	0	0	0

<sup>(</sup>b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

\* 6 0 3 2 1 2 0 0 8 2 0 6 0 8 1 0 5 \* DELAWARE DURING THE YEAR

DIRECT BUSINESS IN THE STATE OF

NAIC Group Code.....0707

NAIC Company Code.....60321

#### LIFF INSURANCE

	L	ILE INOUK!	AINCE			
		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	0.4	marriada.)	0.000		
1.	Life insurance			65.192		65.192
2.	Annuity considerations			,		,
3.	Deposit-type contract funds					0
4.	Other considerations.					0
5.	Totals (Sum of Lines 1 to 4)	0	0	65.192	0	65.192
	DIRECT DIVIDENDS TO POLICYHOLDERS			,		
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					0
6.3	Applied to provide paid-up additions or shorten the endowment					
	or premium-paying period					
6.4	Other					
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	C
7.1	Paid in cash or left on deposit					C
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits			14,693		14,693
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts					C
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	C
14.	All other benefits, except accident and health					0
15.	Totals	0	0	14,693	0	14,693
		DETAILS O	F WRITE-INS			
1301						0
1302						
1303						
1398	. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	
1399	. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	(	Ordinary	Credit Life			Group	In	dustrial		Total
			(Group	and Individual)						
	1	2	3	4	5	6	7	8	9	10
			No. of Ind.							
			Pols. & Gr.		No. of					
	No.	Amount	Certifs.	Amount	Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND										
MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year					1	7,716			1	7,716
17. Incurred during current year					3	13,482			3	13,482
Settled during current year:										
18.1 By payment in full									0	0
18.1 By payment in full									0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
<ol><li>Unpaid Dec. 31, current year</li></ol>										
(Lines 16 + 17 - 18.6)	0	0	0	0	4	21,198	0	0	4	21,198
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year				(a)	65	9,641,553			65	9,641,553
21. Issued during year									0	0
22. Other changes to in force (Net)					(58)	(5,603,049)			(58)	(5,603,049)
23. In force December 31 of current year	0	0	0	(a)0	7	4,038,504	0	0	7	4,038,504

(a) Includes Individual Credit Life Insurance, prior year \$.........0 current year \$........0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$........0 current year \$........0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$.........0 current year \$........0.

ACCIDENT AND HEALTH INCONANCE											
	1	2	3	4	5						
			Dividends Paid Or	Direct							
	Direct	Direct Premiums	Credited on Direct	Losses	Direct Losses						
	Premiums	Earned	Business	Paid	Incurred						
24. Group policies (b)											
24.1 Federal Employee Health Benefits Program premium (b)											
24.2 Credit (group and individual)											
24.3 Collectively renewable policies (b)											
Other Individual Policies:	IVOI	YL									
25.1 Non-cancelable (b)											
25.2 Guaranteed renewable (b)											
25.3 Non-renewable for stated reasons only (b)											
25.4 Other accident only											
25.5 All other (b)											
25.6 Totals (Sum of Lines 25.1 to 25.5)		0	0	0	0						
26 Totals (Lines 24 + 24 1 + 24 2 + 24 3 + 2 4 + 25 6)	0	0	1 0	1 0	1 (						

<sup>(</sup>b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.



DIRECT BUSINESS IN THE STATE OF NAIC Group Code.....0707

NAIC Company Code.....60321

#### LIFE INSURANCE

			AIIOL			
		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	Ordinary	marriadary	Отоир	madotnar	Total
1	Life insurance					0
2.						0
3.	Deposit-type contract funds		XXX		XXX	0
4.						0
5.	Totals (Sum of Lines 1 to 4)		0	0	Λ	٥
J.	DIRECT DIVIDENDS TO POLICYHOLDERS					0
	Life insurance:					
6.1						0
6.2	Applied to pay renewal premiums					٥
6.3	Applied to provide paid-up additions or shorten the endowment					0
	or promium paving pariod					0
6.4	Other					٥
6.5	or premium-paying period					٥
0.5	Annuities:			0	0	0
7.1						0
7.1	Paid in cash or left on deposit					0
7.3	The state of the s					0
7.4	Totals (Sum of Lines 7.1 to 7.3)			0		0
8.			0			0
Ö.	Grand Totals (Lines 6.5 + 7.4)  DIRECT CLAIMS AND BENEFITS PAID	U .		0	0	0
9.	Death benefits					0
10.	Matured endowments					0
11.	Annuity benefits					0
12.	Surrender values and withdrawals for life contracts					0
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health					0
15.	Totals	0	0	0	0	0
			OF WRITE-INS			
1301.						0
1302.						0
1303.						0
	Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	(	Ordinary	(	Credit Life		Group	In	dustrial		Total
		•	(Group	and Individual)		•				
	1	2	3	4	5	6	7	8	9	10
			No. of Ind.							
			Pols. & Gr.		No. of					
	No.	Amount	Certifs.	Amount	Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND										
MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year									0	
17. Incurred during current year									0	(
Settled during current year:										
40.4 D									0	
18.1 By payment in tull			<u></u>		<u></u>				0	(
18.3 Totals paid	0	0		0	0	0	0	0	0	
18.4 Reduction by compromise										
18.5 Amount rejected				• • • • • • • • • • • • • • • • • • • •					0	
18.6 Total settlements	0	0	0	0	0	0	0	0	0	
19. Unpaid Dec. 31, current year										
(Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year				(a)					0	
21. Issued during year									0	
21. Issued during year									0	
23. In force December 31 of current year							0	0	0	

(a) Includes Individual Credit Life Insurance, prior year \$.........0 current year \$........0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$........0 current year \$.......0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$........0 current year \$.......0.

	1	2	3	4	5
			Dividends Paid Or	Direct	
	Direct	Direct Premiums	Credited on Direct	Losses	Direct Losses
	Premiums	Earned	Business	Paid	Incurred
24. Group policies (b)					
24.1 Federal Employee Health Benefits Program premium (b)					
24.2 Credit (group and individual)					
24.3 Collectively renewable policies (b)					
24.3 Collectively renewable policies (b)					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)		0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 2.4 + 25.6)		0	0	0	0

<sup>(</sup>b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.



\* 6 0 3 2 1 2 0 0 8 2 0
DIRECT BUSINESS IN GRAND TOTAL DURING THE YEAR

NAIC Group Code.....0707

NAIC Company Code.....60321

#### LIFE INSURANCE

			/ 1110L			
		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	Ordinary	marriadai)	Стоир	madotriai	Total
1	Life insurance			1.661.025		1.661.025
2.	Annuity considerations			, ,		0
3.	Deposit-type contract funds		XXX		XXX	0
4						0
5	Totals (Sum of Lines 1 to 4)		0	1,661,025	0	1.661.025
J.	DIRECT DIVIDENDS TO POLICYHOLDERS			1,001,020		1,001,020
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					Λ
6.3	Applied to provide paid-up additions or shorten the endowment					0
0.5	or premium-paying period					0
6.4	Other					٥
6.5	Totals (Sum of Lines 6.1 to 6.4)		0	0	Λ	٥٥
0.5	Annuities:			0	0	0
7.1	Paid in cash or left on deposit					0
7.1	Applied to provide paid-up annuities					٥٥
7.3	Other					٥٥
7.4	Totals (Sum of Lines 7.1 to 7.3)		0	0	0	٥
8.		0		0	٥	٥
0.	DIRECT CLAIMS AND BENEFITS PAID				0	0
9.	Death benefits			792.028		792.028
10.	Matured endowments.			. ,		792,020 N
11.	Annuity benefits					٥٥
12.	Surrender values and withdrawals for life contracts					٥٥
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid				0	0
14.	All other benefits, except accident and health				•	0
15.	•					792.028
10.	Totals			192,020	0	192,020
100:			OF WRITE-INS	i		_
1301.						0
						0
1303.						0
	Summary of remaining write-ins for Line 13 from overflow page			0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	(	Ordinary		Credit Life		Group	Industrial			Total
		_	(Group	and Individual)	_					
	1	2	3	4	5	6	7	8	9	10
			No. of Ind.							
	NI.	A	Pols. & Gr.	A 1	No. of	A 1	M.	A	NI.	A
	No.	Amount	Certifs.	Amount	Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND										
MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	1	34,264			78	1,410,951			79	1,445,215
17. Incurred during current year	1	9,223			46	726,741			47	735,964
Settled during current year:										
18.1 By payment in full									0	0
18.2 By payment on compromised claims.									0	0
18.3 Totals paid				0			0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year										
(Lines 16 + 17 - 18.6)	2	43,487	0	0	124	2,137,692	0	0	126	2,181,179
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	8	130,000		(a)	2,458				2,466	303,338,000
21. Issued during year									0	0
22. Other changes to in force (Net)	(1)	(10,000)			(1,821)	(176,196,500)			(1,822)	(176,206,500)
23. In force December 31 of current year	7	120,000	0	(a)0	637	127,011,500	0	0	644	127,131,500

(a) Includes Individual Credit Life Insurance, prior year \$.........0 current year \$........0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$........0 current year \$........0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$.........0 current year \$........0.

ACCIDENT AND HEALTH INCONANCE											
	1	2	3	4	5						
			Dividends Paid Or	Direct							
	Direct	Direct Premiums	Credited on Direct	Losses	Direct Losses						
	Premiums	Earned	Business	Paid	Incurred						
24. Group policies (b)											
24.1 Federal Employee Health Benefits Program premium (b)											
24.2 Credit (group and individual)											
24.3 Collectively renewable policies (b)											
Other Individual Policies:	IVOI	YL									
25.1 Non-cancelable (b)											
25.2 Guaranteed renewable (b)											
25.3 Non-renewable for stated reasons only (b)											
25.4 Other accident only											
25.5 All other (b)											
25.6 Totals (Sum of Lines 25.1 to 25.5)		0	0	0	0						
26 Totals (Lines 24 + 24 1 + 24 2 + 24 3 + 2 4 + 25 6)	0	0	1 0	1 0	1 (						

<sup>(</sup>b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

DIRECT BUSINESS IN THE STATE OF

NAIC Group Code.....0707

NAIC Company Code.....60321

#### LIFE INSURANCE

		1	2	3	1	5
		ı	Credit Life (Group and		4	J
		Ordinary	Individual)	Group	Industrial	Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance					0
2.	Annuity considerations					0
3.	Deposit-type contract funds		XXX		XXX	0
4.	Other considerations					0
5.		0	0 .	0 .	0	0
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					0
6.3						
	or premium-paying period					0
6.4						0
6.5	Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0 .	0 .	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0 .	0 .	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits					0
10.	Matured endowments					0
11.	Annuity benefits					0
12.	Surrender values and withdrawals for life contracts					0
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0 .	0	0	0
14.	All other benefits, except accident and health					0
15.	Totals	0	0 .	0 .	0	0
		DETAILS C	F WRITE-INS	<u> </u>		
1301						0
1302						0
1303						0
1398	Summary of remaining write-ins for Line 13 from overflow page	0	0 .		0	0
	. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)				0	0

	(	Ordinary		Credit Life		Group		dustrial		Total
			(Group	and Individual)						
	1	2	3	4	5	6	7	8	9	10
			No. of Ind.							
			Pols. & Gr.		No. of					
	No.	Amount	Certifs.	Amount	Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND										
MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year									0	0
17. Incurred during current year									0	0
Settled during current year:										
18.1 By payment in full									0	0
18.2 By payment on compromised claims.			<u></u>		<u></u>				0	0
18.2 By payment on compromised claims. 18.3 Totals paid	0	0		0	0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
10.0 Total Settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year										
(Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year									0	0
21. Issued during year									0	0
22. Other changes to in force (Net)									0	0
23. In force December 31 of current year	0	0	0	(a)0	0	0	0	0	0	0

(a) Includes Individual Credit Life Insurance, prior year \$.........0 current year \$........0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$........0 current year \$........0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$.........0 current year \$........0.

ACCIDENT AND HEALTH INSURANCE											
	1	2	3	4	5						
			Dividends Paid Or	Direct							
	Direct	Direct Premiums	Credited on Direct	Losses	Direct Losses						
	Premiums	Earned	Business	Paid	Incurred						
24. Group policies (b)											
24.1 Federal Employee Health Benefits Program premium (b)											
24.2 Credit (group and individual)											
24.3 Collectively renewable policies (b)											
24.3 Collectively renewable policies (b)											
Other Individual Policies:											
25.1 Non-cancelable (b)											
25.2 Guaranteed renewable (b)											
25.3 Non-renewable for stated reasons only (b)											
25.4 Other accident only											
25.5 All other (b)											
25.6 Totals (Sum of Lines 25.1 to 25.5)	0	0	0	0	0						
26 Totals (Lines 24 + 24 1 + 24 2 + 24 3 + 2 4 + 25 6)		0	0	0	0						

<sup>(</sup>b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

\* 6 0 3 2 1 2 0 0 8 2 0 6 1
DIRECT BUSINESS IN THE STATE OF IDAHO DURING THE YEAR

NAIC Group Code.....0707

NAIC Company Code.....60321

#### LIFE INSURANCE

		1	2	3	1	5
		ı	Credit Life (Group and		4	J
		Ordinary	Individual)	Group	Industrial	Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance					0
2.	Annuity considerations					0
3.	Deposit-type contract funds		XXX		XXX	0
4.	Other considerations					0
5.		0	0 .	0 .	0	0
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					0
6.3						
	or premium-paying period					0
6.4						0
6.5	Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0 .	0 .	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0 .	0 .	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits					0
10.	Matured endowments					0
11.	Annuity benefits					0
12.	Surrender values and withdrawals for life contracts					0
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0 .	0	0	0
14.	All other benefits, except accident and health					0
15.	Totals	0	0 .	0 .	0	0
		DETAILS C	F WRITE-INS	<u> </u>		
1301						0
1302						0
1303						0
1398	Summary of remaining write-ins for Line 13 from overflow page	0	0 .		0	0
	. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)				0	0

	(	Ordinary		Credit Life		Group		dustrial		Total
			(Group	and Individual)						
	1	2	3	4	5	6	7	8	9	10
			No. of Ind.							
			Pols. & Gr.		No. of					
	No.	Amount	Certifs.	Amount	Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND										
MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year									0	0
17. Incurred during current year									0	0
Settled during current year:										
18.1 By payment in full									0	0
18.2 By payment on compromised claims.			<u></u>		<u></u>				0	0
18.2 By payment on compromised claims. 18.3 Totals paid	0	0		0	0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
10.0 Total Settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year										
(Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year									0	0
21. Issued during year									0	0
22. Other changes to in force (Net)									0	0
23. In force December 31 of current year	0	0	0	(a)0	0	0	0	0	0	0

(a) Includes Individual Credit Life Insurance, prior year \$.........0 current year \$........0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$........0 current year \$........0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$.........0 current year \$........0.

	1	2	3	4	5
			Dividends Paid Or	Direct	
	Direct	Direct Premiums	Credited on Direct	Losses	Direct Losses
	Premiums	Earned	Business	Paid	Incurred
24. Group policies (b)					
24.1 Federal Employee Health Benefits Program premium (b)(b)					
24.2 Credit (group and individual)					
24.3 Collectively renewable policies (b)					
Other Individual Policies:		Y L			
25.1 Non-cancelable (b)					
OF O Consented and an acceptable (b)					
OF 2. New research is few stated as a series (h)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)		0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 2.4 + 25.6)		0	0	0	0

<sup>(</sup>b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

DIRECT BUSINESS IN THE STATE OF

NAIC Company Code.....60321

NAIC Group Code.....0707

#### LIFE INSURANCE

DIRECT DIVIDENDS TO POLICYHOLDERS   Life insurance:				MITOL			
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS   Individual   Group   Industrial   Total			1		3	4	5
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS   1. Life insurance.			Ordinary		Group	Industrial	Total
1. Life insurance   2. Annuity considerations.   3. Deposit type contract funds.   3. Deposit type contract funds.   3. Opposit type contract funds.   4. Other considerations.   5. Totals (Sum of Lines 1 to 4).   0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.		DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	0.0	marria a a i	0.000		
2. Annuity considerations.	1.						0
3. Deposit-type contract funds	2						0
4. Other considerations.  5. Totals (Sum of Lines 1 to 4).  DIRECT DIVIDENDS TO POLICYHOLDERS  Life insurance:  6.1 Paid in cash or left on deposit.  6.2 Applied to pay renewal premiums.  6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.  6.4 Other.  6.5 Totals (Sum of Lines 6.1 to 6.4).  Annutites:  7.1 Paid in cash or left on deposit.  7.2 Applied to provide paid-up annutities.  7.3 Other.  7.3 Other.  7.4 Totals (Sum of Lines 7.1 to 7.3)  8. Grand Totals (Lines 6.5 + 7.4)  9. Death benefits.  10. Matured endowments.  11. Annuity benefits.  12. Surrender values and withdrawals for life contracts.  13. Aggregate write-ins for miscellaneous direct claims and benefits paid.  15. Totals.  10. O 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		•		XXX		XXX	0
Totals (Sum of Lines 1 to 4)	-	1 71					
DIRECT DIVIDENDS TO POLICYHOLDERS   Life insurance:	5.						•
Life insurance:   Paid in cash or left on deposit.							
6.1 Paid in cash or left on deposit. 6.2 Applied to pay renewal premiums. 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period. 6.4 Other. 6.5 Totals (Sum of Lines 6.1 to 6.4)							
6.2 Applied to pay renewal premiums	6.1						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period. 6.4 Other. 6.5 Totals (Sum of Lines 6.1 to 6.4)	6.2						0
or premium-paying period							
Annuities:       7.1 Paid in cash or left on deposit		or premium-paying period					0
Annuities:       7.1 Paid in cash or left on deposit	6.4	Other					0
Annuities:       7.1 Paid in cash or left on deposit	6.5	Totals (Sum of Lines 6.1 to 6.4)		<b>N</b> 0	0	0	0
7.2 Applied to provide paid-up annuities							
7.2 Applied to provide paid-up annuities	7.1	Paid in cash or left on deposit					0
7.3 Other	7.2						0
8.   Grand Totals (Lines 6.5 + 7.4)   0   0   0   0   0   0   0     DIRECT CLAIMS AND BENEFITS PAID   9.   Death benefits	7.3						0
8. Grand Totals (Lines 6.5 + 7.4)       0	7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID  9. Death benefits	8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
10. Matured endowments							
11. Annuity benefits.          12. Surrender values and withdrawals for life contracts.          13. Aggregate write-ins for miscellaneous direct claims and benefits paid.          14. All other benefits, except accident and health.          15. Totals.	9.	Death benefits					0
12. Surrender values and withdrawals for life contracts	10.	Matured endowments					0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	11.	Annuity benefits					0
14. All other benefits, except accident and health	12.	Surrender values and withdrawals for life contracts					0
14. All other benefits, except accident and health	13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
	14.	All other benefits, except accident and health					0
	15.	Totals	0	0	0	0	0
DETAILS OF WRITE-INS			DETAILS	OF WRITE-INS	<u> </u>		<u> </u>
1301.	1301		1				0
1302							0
1303.							0
1398. Summary of remaining write-ins for Line 13 from overflow page			0			0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)		, ,					0

	(	Ordinary		Credit Life		Group	In	dustrial		Total
			(Group	and Individual)	_				_	
	1	2	3	4	5	6	7	8	9	10
			No. of Ind.							
			Pols. & Gr.		No. of					
	No.	Amount	Certifs.	Amount	Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND										
MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year									0	0
17. Incurred during current year									0	0
Settled during current year:										
18.1 By payment in full									0	0
18.1 By payment in full			<u></u>						0	0
18.3 Totals paid	0	0		0	<u></u> 0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year										
(Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year				(a)					0	0
21. Issued during year									0	0
22. Other changes to in force (Net)									0	0
23. In force December 31 of current year	0	0	0	(a)0	0	0	0	0	0	0

(a) Includes Individual Credit Life Insurance, prior year \$.........0 current year \$........0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$........0 current year \$........0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$.........0 current year \$........0.

	1	2	3	4	5
			Dividends Paid Or	Direct	
	Direct	Direct Premiums	Credited on Direct	Losses	Direct Losses
	Premiums	Earned	Business	Paid	Incurred
24. Group policies (b)					
24.1 Federal Employee Health Benefits Program premium (b)					
24.2 Credit (group and individual)					
24.3 Collectively renewable policies (b)					
24.3 Collectively renewable policies (b)					
Other Individual Policies:		Y L			
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)		0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 2.4 + 25.6)		0	0	0	0

<sup>(</sup>b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

DIRECT BUSINESS IN THE STATE OF

NAIC Company Code.....60321

NAIC Group Code.....0707

#### LIFE INSURANCE

	<u>L</u>		ANGL			
		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	,				
1	Life insurance					0
2.	Annuity considerations					0
3.	Deposit-type contract funds				XXX	0
4.	Other considerations					0
5.	Totals (Sum of Lines 1 to 4)		0	0	0	0
- O.	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2						0
-	Applied to provide paid-up additions or shorten the endowment					
0.0	or premium-paying period					0
6.4	Other	RICAR				٥
6.5	or premium-paying period Other		0	0	n	٥
0.5	Annuities:					
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits					0
10.	Matured endowments					0
11.	Annuity benefits					0
12.	Surrender values and withdrawals for life contracts					0
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0
14.	All other benefits, except accident and health					0
15.	Totals	0	0	0	0	0
	<u> </u>	DETAILS (	OF WRITE-INS			
1301.		DE:AILO				
1302						0
						٥
	Summary of remaining write-ins for Line 13 from overflow page			0	0	
1399	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	
1000.	- 10tal (Ellico 1001 tilla 1000 pias 1000)(Ellic 10 above)					

	(	Ordinary		Credit Life		Group	In	dustrial		Total
			(Group	and Individual)	_				_	
	1	2	3	4	5	6	7	8	9	10
			No. of Ind.							
			Pols. & Gr.		No. of					
	No.	Amount	Certifs.	Amount	Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND										
MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year									0	0
17. Incurred during current year									0	0
Settled during current year:										
18.1 By payment in full									0	0
18.1 By payment in full			<u></u>						0	0
18.3 Totals paid	0	0		0	<u></u> 0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year										
(Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year				(a)					0	0
21. Issued during year									0	0
22. Other changes to in force (Net)									0	0
23. In force December 31 of current year	0	0	0	(a)0	0	0	0	0	0	0

(a) Includes Individual Credit Life Insurance, prior year \$.........0 current year \$........0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$........0 current year \$........0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$.........0 current year \$........0.

	1	2	3	4	5
			Dividends Paid Or	Direct	
	Direct	Direct Premiums	Credited on Direct	Losses	Direct Losses
	Premiums	Earned	Business	Paid	Incurred
24. Group policies (b)					
24.1 Federal Employee Health Benefits Program premium (b)					
24.2 Credit (group and individual)					
24.3 Collectively renewable policies (b)		\			
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)		0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 2.4 + 25.6)	0	0	0	0	0

<sup>(</sup>b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

DIRECT BUSINESS IN THE STATE OF

NAIC Company Code.....60321

NAIC Group Code.....0707

#### LIFE INSURANCE

	<u>L</u>		ANGL			
		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	,				
1	Life insurance					0
2.	Annuity considerations					0
3.	Deposit-type contract funds				XXX	0
4.	Other considerations					0
5.	Totals (Sum of Lines 1 to 4)		0	0	0	0
- O.	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2						0
-	Applied to provide paid-up additions or shorten the endowment					
0.0	or premium-paying period					0
6.4	Other	RICAR				٥
6.5	or premium-paying period Other		0	0	n	٥
0.5	Annuities:					
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits					0
10.	Matured endowments					0
11.	Annuity benefits					0
12.	Surrender values and withdrawals for life contracts					0
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0
14.	All other benefits, except accident and health					0
15.	Totals	0	0	0	0	0
	<u> </u>	DETAILS (	OF WRITE-INS			
1301.		DE:AILO				
1302						0
						٥
	Summary of remaining write-ins for Line 13 from overflow page			0	0	
1399	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	
1000.	- 10tal (Ellico 1001 tilla 1000 pias 1000)(Ellic 10 above)					

	(	Ordinary	(	Credit Life		Group	Inc	dustrial		Total
			(Group	and Individual)						
	1	2	3	4	5	6	7	8	9	10
			No. of Ind.							
	NI-	A 4	Pols. & Gr.	A 4	No. of	A	NI-	A 4	NI-	A t
DIDEAT DEATH DENESTO AND	No.	Amount	Certifs.	Amount	Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND										
MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year									0	0
17. Incurred during current year									0	0
Settled during current year:										
18.1 By payment in full									0	0
18.2 By payment on compromised claims.									0	0
18.2 By payment on compromised claims. 18.3 Totals paid	0	0		0	<u></u> 0	0	0	0	0	0
18.4 Reduction by compromise					<u></u>				0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year										
(Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year				(a)					0	0
21. Issued during year									0	0
22. Other changes to in force (Net)									0	0
23. In force December 31 of current year	0	0	0	(a)0	0	0	0	0	0	0

(a) Includes Individual Credit Life Insurance, prior year \$.........0 current year \$........0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$........0 current year \$........0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$.........0 current year \$........0.

	1	2	3	4	5
			Dividends Paid Or	Direct	
	Direct	Direct Premiums	Credited on Direct	Losses	Direct Losses
	Premiums	Earned	Business	Paid	Incurred
24. Group policies (b)					
24.1 Federal Employee Health Benefits Program premium (b)(b)					
24.2 Credit (group and individual)					
24.3 Collectively renewable policies (b)					
Other Individual Policies:		Y L			
25.1 Non-cancelable (b)					
OF O Consented and an acceptable (b)					
OF 2. New research is few stated as a series (h)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)		0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 2.4 + 25.6)		0	0	0	0

<sup>(</sup>b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

\* 6 0 3 2 1 2 0 0 8 2 0 6 1 8 1 0 5 \*

KENTUCKY DURING THE YEAR

DIRECT BUSINESS IN THE STATE OF

NAIC Group Code.....0707

NAIC Company Code.....60321

#### LIFE INSURANCE

		LIFE INSUR/	AINCE			
		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	0.0	arriada.)	0.000		
1.	1.7					0
2.	Annuity considerations					0
3.	Deposit-type contract funds		XXX		XXX	0
4.	Other considerations					0
5.	Totals (Sum of Lines 1 to 4)			0	0	0
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					0
6.3						
						0
6.4	Other					0
6.5	or premium-paying period		0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0 .	0	0	0
8.		0	0 .	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits					0
10.	Matured endowments					0
11.	Annuity benefits					0
12.	Surrender values and withdrawals for life contracts					0
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health					0
15.	Totals	0	0	0	0	0
		DETAILS C	F WRITE-INS			
1301.			. WILLIE			0
						0
						0
	Summary of remaining write-ins for Line 13 from overflow page			0	0	0
	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)				0	0
. 000.	- Cas. (2 100 - 100 pide 1000)(2 10 de 100)					

	(	Ordinary	(	Credit Life		Group	Inc	dustrial		Total
			(Group	and Individual)						
	1	2	3	4	5	6	7	8	9	10
			No. of Ind.							
	NI-	A 4	Pols. & Gr.	A 4	No. of	A	NI-	A 4	NI-	A t
DIDEAT DEATH DENESTO AND	No.	Amount	Certifs.	Amount	Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND										
MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year									0	0
17. Incurred during current year									0	0
Settled during current year:										
18.1 By payment in full									0	0
18.2 By payment on compromised claims.									0	0
18.2 By payment on compromised claims. 18.3 Totals paid	0	0		0	<u></u> 0	0	0	0	0	0
18.4 Reduction by compromise					<u></u>				0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year										
(Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year				(a)					0	0
21. Issued during year									0	0
22. Other changes to in force (Net)									0	0
23. In force December 31 of current year	0	0	0	(a)0	0	0	0	0	0	0

(a) Includes Individual Credit Life Insurance, prior year \$.........0 current year \$........0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$........0 current year \$........0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$.........0 current year \$........0.

	1	2	2	1	5
	'	2	Dividends Paid Or	Direct	J
	D' t	D'and Daniel and		Direct	D'
	Direct	Direct Premiums	Credited on Direct	Losses	Direct Losses
	Premiums	Earned	Business	Paid	Incurred
24. Group policies (b)					
24.1 Federal Employee Health Benefits Program premium (b)					
24.2 Credit (group and individual)					
24.3 Collectively renewable policies (b)					
Other Individual Policies:		Y L			
25.1 Non-cancelable (b)					
OF O Comments and announce last (h)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)		0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 2.4 + 25.6)	0	0	0	0	0

<sup>(</sup>b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

\* 6 0 3 2 1 2 0 0 8 2 0 6 1 9 1 0 5 \*
LOUISIANA DURING THE YEAR

DIRECT BUSINESS IN THE STATE OF

NAIC Group Code.....0707

NAIC Company Code.....60321

#### LIFE INSURANCE

	LIFE INSURANCE											
		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total						
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS			2.224								
1	Life insurance					0						
2.	Annuity considerations					0						
3.	Deposit-type contract funds											
4	Other considerations					0						
5	Totals (Sum of Lines 1 to 4)		0			•••••••••••••••••••••••••••••••••••••••						
- O.	DIRECT DIVIDENDS TO POLICYHOLDERS											
	Life insurance:											
6.1	Paid in cash or left on deposit					0						
6.2	Applied to pay renewal premiums					0						
6.3	Applied to provide paid-up additions or shorten the endowment											
0.0	or premium-paying period					0						
6.4	Other					0						
6.5	or premium-paying period Other Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0						
0.0	Annuities:											
7.1	Paid in cash or left on deposit					0						
72	Applied to provide paid-up annuities					0						
7.3	Other					0						
7.4	Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0						
8.	Grand Totals (Lines 6.5 + 7.4)		0	0	0	0						
	DIRECT CLAIMS AND BENEFITS PAID											
9.	Death benefits					0						
10.	Matured endowments					0						
11.	Annuity benefits					0						
12.	Surrender values and withdrawals for life contracts					0						
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0 .	0 .	0	0						
14.	All other benefits, except accident and health					0						
15.	Totals		0 .	0 .	0	0						
		1	OF WRITE-INS	<u></u>								
1301		DLIAILS	OF WKITE-INS			n						
1302						٥						
1302						٥						
	Summary of remaining write-ins for Line 13 from overflow page				0	٥						
	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)		n		0	٥						
1000	10tal (Ellies 1007 tillu 1000 plus 1000)(Ellie 10 above)				0	0						

	(	Ordinary	(	Credit Life		Group	Inc	dustrial		Total
			(Group	and Individual)						
	1	2	3	4	5	6	7	8	9	10
			No. of Ind.							
	NI.		Pols. & Gr.	A 1	No. of	A 1	NI.	A	NI.	A
	No.	Amount	Certifs.	Amount	Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND										
MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year									0	0
17. Incurred during current year									0	0
Settled during current year:										
18.1 By payment in full									0	0
18.2 By payment on compromised claims.			<u></u>						0	0
18.3 Totals paid	0	0		0	0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year										
(Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year									0	0
21. Issued during year									0	0
22. Other changes to in force (Net)									0	0
23. In force December 31 of current year	0	0	0	(a)0	0	0	0	0	0	0

(a) Includes Individual Credit Life Insurance, prior year \$.........0 current year \$........0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$........0 current year \$........0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$.........0 current year \$........0.

	1	2	3	4	5
			Dividends Paid Or	Direct	
	Direct	Direct Premiums	Credited on Direct	Losses	Direct Losses
	Premiums	Earned	Business	Paid	Incurred
24. Group policies (b)					
24.1 Federal Employee Health Benefits Program premium (b)(b)					
24.2 Credit (group and individual)					
24.3 Collectively renewable policies (b)					
Other Individual Policies:		Y L			
25.1 Non-cancelable (b)					
OF O Consented and an acceptable (b)					
OF 2. New research is few stated as a series (h)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)		0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 2.4 + 25.6)		0	0	0	0

<sup>(</sup>b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

\* 6 0 3 2 1 2 0 0 8 2 0 6 2 1 1 0 5 \* MARYLAND DURING THE YEAR

DIRECT BUSINESS IN THE STATE OF

NAIC Group Code.....0707

NAIC Company Code.....60321

#### LIFE INSURANCE

			HIVL			
		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance			949,267		949,267
2.	Annuity considerations					0
3.	Deposit-type contract funds		XXX		XXX	0
4.	Other considerations					0
5.	Totals (Sum of Lines 1 to 4)		0	949,267	0	949,267
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4						0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0 .	0	C
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0 .	0	C
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits			447,974		447,974
10.	Matured endowments					C
11.	Annuity benefits					C
12.	Surrender values and withdrawals for life contracts					C
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	C
14.	All other benefits, except accident and health					C
15.	Totals	0	0	447,974	0	447,974
		DETAILS C	F WRITE-INS			
1301						C
1302						
1303						
1398	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	C
	. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)		0	0	0	

	(	Ordinary		Credit Life		Group	In	dustrial		Total
			(Group	and Individual)						
	1	2	3	4	5	6	7	8	9	10
			No. of Ind.							
			Pols. & Gr.		No. of					
	No.	Amount	Certifs.	Amount	Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND										
MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year									49	800,854
17. Incurred during current year	1	9,223			32	411,032			33	420,255
Settled during current year:										
18.1 By payment in full									0	0
18.1 By payment in full									0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year										
(Lines 16 + 17 - 18.6)	2	43,486	0	0	80	1,177,623	0	0	82	1,221,109
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	4	65,000		(a)	260	46,222,373			264	46,287,373
21. Issued during year									0	0
22. Other changes to in force (Net)									(279)	(26,922,825)
23. In force December 31 of current year	4	65,000	0	(a)0	(19)	19,299,548	0	0	(15)	19,364,548

(a) Includes Individual Credit Life Insurance, prior year \$.........0 current year \$........0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$........0 current year \$........0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$.........0 current year \$........0.

	1	2	3	4	5
			Dividends Paid Or	Direct	
	Direct	Direct Premiums	Credited on Direct	Losses	Direct Losses
	Premiums	Earned	Business	Paid	Incurred
24. Group policies (b)					
24.1 Federal Employee Health Benefits Program premium (b)					
24.2 Credit (group and individual)					
24.3 Collectively renewable policies (b)					
24.3 Collectively renewable policies (b)					
Other Individual Policies:		Y L			
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)		0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 2.4 + 25.6)		0	0	0	0

<sup>(</sup>b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

\* 6 0 3 2 1 2 0 0 8 2 0 6 2 6 1 0 5 \*
MISSOURI DURING THE YEAR

DIRECT BUSINESS IN THE STATE OF NAIC Group Code.....0707

NAIC Company Code.....60321

#### LIFE INSURANCE

		1	2	3	1	5
		Ondinana	Credit Life (Group and		To described	Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	Ordinary	Individual)	Group	Industrial	lotal
_				123.151		123.151
1.				123,131		123,131
2.	Annuity considerations  Deposit-type contract funds				XXX	0
3.						0
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)		0	123,151	0	123,151
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					•
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4						0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID	-		-	-	
9.	Death benefits					0
10.	Matured endowments					0
11.	Annuity benefits					0
12.	Surrender values and withdrawals for life contracts					0
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health					0
15.	Totals			0	0	0
			F WRITE-INS			
1301						0
1302						0
1303						0
1398	. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
	. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)				0	0

	(	Ordinary		Credit Life	Group		Industrial		Total	
			(Group	and Individual)						
	1	2	3	4	5	6	7	8	9	10
			No. of Ind.							
			Pols. & Gr.		No. of					
	No.	Amount	Certifs.	Amount	Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND										
MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year					1				1	0
17. Incurred during current year									0	0
Settled during current year:										
18.1 By payment in full									0	0
18.2 By payment on compromised claims.									0	0
18.3 Totals paid					0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year										
(Lines 16 + 17 - 18.6)	0	0	0	0	1	0	0	0	1	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year					45	4,052,033			45	4,052,033
21. Issued during year									0	0
22. Other changes to in force (Net)					(25)				(25)	(2,361,033)
23. In force December 31 of current year	0	0	0	(a)0	20	1,691,000	0	0	20	1,691,000

(a) Includes Individual Credit Life Insurance, prior year \$.........0 current year \$........0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$........0 current year \$........0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$.........0 current year \$........0.

ACCIDEI	ACCIDENT AND HEALTH INCONANCE												
	1	2	3	4	5								
			Dividends Paid Or	Direct									
	Direct	Direct Premiums	Credited on Direct	Losses	Direct Losses								
	Premiums	Earned	Business	Paid	Incurred								
24. Group policies (b)													
24.1 Federal Employee Health Benefits Program premium (b)													
24.2 Credit (group and individual)													
24.3 Collectively renewable policies (b)													
24.3 Collectively renewable policies (b)  24.4 Medicare Title XVIII exempt from state taxes or fees													
Other Individual Policies:		N L											
25.1 Non-cancelable (b)													
25.2 Guaranteed renewable (b)													
25.3 Non-renewable for stated reasons only (b)													
25.4 Other accident only													
25.5 All other (b)													
25.6 Totals (Sum of Lines 25.1 to 25.5)		0	0	0	0								
26 Totals (Lines 24 + 24 1 + 24 2 + 24 3 + 24 + 25 6)	0	0	0	1	1								

DIRECT BUSINESS IN THE STATE OF

NAIC Group Code.....0707

\* 6 0 3 2 1 2 0 0 8 2 0 6 2 5
MISSISSIPPI DURING THE YEAR
NAIC Company Code.....60321

#### LIFE INSURANCE

		1	2 Credit Life (Group and	3	4	5
		Ordinary	Individual)	Group	Industrial	Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance					0
2.	Annuity considerations					0
3.	Deposit-type contract funds		XXX		XXX	0
4.	Other considerations					0
5.	Totals (Sum of Lines 1 to 4)	0	0	0	0	0
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					0
6.3	Applied to provide paid-up additions or shorten the endowment					
	or premium-paying period					0
6.4	Other					0
6.5	or premium-paying period		0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits					0
10.	Matured endowments					0
11.	Annuity benefits					0
12.	Surrender values and withdrawals for life contracts					0
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health					0
15.	Totals	0	0	0	0	0
		DETAILS	OF WRITE-INS	1	<u> </u>	1
1301.		DETAILO	OI WINITE-ING			n
1301.						n
						n
	Summary of remaining write-ins for Line 13 from overflow page	0		0	Λ	n
	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)			0	۰	
1399.	Total (Lines 1501 tillu 1505 pius 1586)(Line 15 above)	U	U	U	U	U

	(	Ordinary	(	Credit Life		Group	In	dustrial	Total	
			(Group	and Individual)						
	1	2	3	4	5	6	7	8	9	10
			No. of Ind.							
	NI.		Pols. & Gr.	A 1	No. of	A	NI.	A	NI.	A 1
	No.	Amount	Certifs.	Amount	Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND										
MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year									0	0
17. Incurred during current year									0	0
Settled during current year:										
18.1 By payment in full									0	0
18.2 By payment on compromised claims.									0	0
18.3 Totals paid	0	0		0	0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected			<del></del>						0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year										
(Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year				(a)					0	0
21. Issued during year									0	0
22. Other changes to in force (Net)									0	0
23. In force December 31 of current year	0	0	0	(a)0	0	0	0	0	0	0

(a) Includes Individual Credit Life Insurance, prior year \$.........0 current year \$........0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$........0 current year \$........0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$.........0 current year \$........0.

	1	2	3	4	5
			Dividends Paid Or	Direct	
	Direct	Direct Premiums	Credited on Direct	Losses	Direct Losses
	Premiums	Earned	Business	Paid	Incurred
24. Group policies (b)					
24.1 Federal Employee Health Benefits Program premium (b)					
24.2 Credit (group and individual)					
24.3 Collectively renewable policies (b)					
Other Individual Policies:		Y L			
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)		0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 2.4 + 25.6)	0	0	0	0	0

<sup>(</sup>b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

## \* 6 0 3 2 1 2 0 0 8 2 0 6 3 4 1 DIRECT BUSINESS IN THE STATE OF NORTH CAROLINA DURING THE YEAR

NAIC Group Code.....0707

NAIC Company Code.....60321

#### LIFE INSURANCE

			ANCL			
		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	Ordinary	inuividuai)	Gloup	muusmai	I Ulai
4				6.986		6.986
1.	Life insurance			-,		-,
2.	Annuity considerations					0
3.	Deposit-type contract funds					0
4.	Other considerations					0
5.	Totals (Sum of Lines 1 to 4)	0	0	6,986	0	6,986
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					0
6.3	Applied to provide paid-up additions or shorten the endowment					
	or premium-paying period					0
6.4	Other					0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID		-	-	-	-
9.	Death benefits					0
10.	Matured endowments					0
11.	Annuity benefits					0
12.	Surrender values and withdrawals for life contracts					0
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid			0	0	0
14.	All other benefits, except accident and health					0
15.	Totals			0	0	0
10.	Totals					
4004		DETAILS	OF WRITE-INS			
1301.						0
1302.						0
						0
	Summary of remaining write-ins for Line 13 from overflow page				0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	(	Ordinary		Credit Life		Group	Inc	dustrial		Total
			(Group	and Individual)						
	1	2	3	4	5	6	7	8	9	10
			No. of Ind.							
			Pols. & Gr.		No. of					
	No.	Amount	Certifs.	Amount	Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND										
MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year		(2,539)			3	30,260			3	27,721
17. Incurred during current year									0	0
Settled during current year:										
18.1 By payment in full									0	0
18.1 By payment in full									0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
<ol><li>Unpaid Dec. 31, current year</li></ol>										
(Lines 16 + 17 - 18.6)	0	(2,539)	0	0	3	30,260	0	0	3	27,721
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year				(a)	840	120,297,751			840	120,297,751
21. Issued during year										0
22. Other changes to in force (Net)					(722)	(69,879,532)			(722)	(69,879,532)
23. In force December 31 of current year	0	0	0	(a)0	118	50,418,219	0	0	118	50,418,219

(a) Includes Individual Credit Life Insurance, prior year \$.........0 current year \$........0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$........0 current year \$........0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$.........0 current year \$........0.

	1	2	3	4	5
			Dividends Paid Or	Direct	
	Direct	Direct Premiums	Credited on Direct	Losses	Direct Losses
	Premiums	Earned	Business	Paid	Incurred
24. Group policies (b)					
24.1 Federal Employee Health Benefits Program premium (b)(b)					
24.2 Credit (group and individual)					
24.3 Collectively renewable policies (b)					
Other Individual Policies:		Y L			
25.1 Non-cancelable (b)					
OF O Consented and an acceptable (b)					
OF 2. New research is few stated as a series (h)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)		0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 2.4 + 25.6)		0	0	0	0

<sup>(</sup>b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

DIRECT BUSINESS IN THE STATE OF

NAIC Group Code.....0707

\* 6 0 3 2 1 2 0 0 8 2 0 6 3 5 1 NORTH DAKOTA DURING THE YEAR NAIC Company Code.....60321

#### LIFF INSURANCE

	LIFE INSURANCE											
		1	2 Credit Life (Group and	3	4	5						
		Ordinary	Individual)	Group	Industrial	Total						
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS											
1.	Life insurance					0						
2.	Annuity considerations					0						
3.	Deposit-type contract funds		XXX		XXX	0						
4.	Other considerations					0						
5.	Totals (Sum of Lines 1 to 4)	0	0	0 .	0	0						
	DIRECT DIVIDENDS TO POLICYHOLDERS											
	Life insurance:											
6.1	Paid in cash or left on deposit					0						
6.2	Applied to pay renewal premiums					0						
6.3	Applied to provide paid-up additions or shorten the endowment											
	or premium-paying period					0						
6.4	Other					0						
6.5	or premium-paying period Other Totals (Sum of Lines 6.1 to 6.4)		0	0 .	0	0						
	Annuities:											
7.1	Paid in cash or left on deposit					0						
7.2	Applied to provide paid-up annuities					0						
7.3	Other					0						
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0 .	0	0						
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0 .	0	0						
	DIRECT CLAIMS AND BENEFITS PAID											
9.	Death benefits					0						
10.	Matured endowments					0						
11.	Annuity benefits					0						
12.	Surrender values and withdrawals for life contracts					0						
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0						
14.	All other benefits, except accident and health					0						
15	Totals		0	0	0	0						
			OF WRITE-INS									
1301		DETAILS	OF WINITE-INS			0						
1301						0						
						0						
1303						0						
	Summary of remaining write-ins for Line 13 from overflow page		0		0	0						
1399	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	00	0 .	0	0						

	(	Ordinary		Credit Life		Group	Inc	dustrial		Total
			(Group	and Individual)						
	1	2	3	4	5	6	7	8	9	10
			No. of Ind.							
			Pols. & Gr.		No. of					
	No.	Amount	Certifs.	Amount	Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND										
MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year									0	0
17. Incurred during current year									0	0
Settled during current year:										
18.1 By payment in full									0	0
18.2 By payment on compromised claims.			<u></u>						0	0
18.1 By payment in full	0	0		0	<u></u> 0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year										
(Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year				(a)					0	0
21. Issued during year									0	0
22. Other changes to in force (Net)									0	0
23. In force December 31 of current year	0	0	0	(a)0	0	0	0	0	0	0

(a) Includes Individual Credit Life Insurance, prior year \$.........0 current year \$........0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$........0 current year \$........0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$.........0 current year \$........0.

ACCIDE			AIICL		
	1	2	3	4	5
			Dividends Paid Or	Direct	
	Direct	Direct Premiums	Credited on Direct	Losses	Direct Losses
	Premiums	Earned	Business	Paid	Incurred
24. Group policies (b)					
24.1 Federal Employee Health Benefits Program premium (b)					
24.2 Credit (group and individual)					
24.3 Collectively renewable policies (b)					
Other Individual Policies:	IVOI	YL			
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)		0	0	0	0
26 Totals (Lines 24 + 24 1 + 24 2 + 24 3 + 2 4 + 25 6)	0	0	1 0	1 0	1 (

<sup>(</sup>b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

DIRECT BUSINESS IN THE STATE OF

NAIC Group Code.....0707

NAIC Company Code.....60321

#### LIFE INSURANCE

	LII L INSUNANCE											
		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total						
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	Ordinary	marriadary	Отоир	madotnar	Total						
1	Life insurance					0						
2.						0						
3.	Deposit-type contract funds		XXX		XXX	0						
4.						0						
5.	Totals (Sum of Lines 1 to 4)		0	0	Λ	٥						
J.	DIRECT DIVIDENDS TO POLICYHOLDERS											
	Life insurance:											
6.1						0						
6.2	Applied to pay renewal premiums					٥						
6.3	Applied to provide paid-up additions or shorten the endowment					0						
	or promium paving pariod					0						
6.4	Other					٥						
6.5	or premium-paying period					٥						
0.5	Annuities:			0	0	0						
7.1						0						
7.1	Paid in cash or left on deposit					0						
7.3	The state of the s					0						
7.4	Totals (Sum of Lines 7.1 to 7.3)			0		0						
8.			0			0						
Ö.	Grand Totals (Lines 6.5 + 7.4)  DIRECT CLAIMS AND BENEFITS PAID	U .		0	0	0						
9.	Death benefits					0						
10.	Matured endowments					0						
11.	Annuity benefits					0						
12.	Surrender values and withdrawals for life contracts					0						
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0						
14.	All other benefits, except accident and health					0						
15.	Totals	0	0	0	0	0						
			OF WRITE-INS									
1301.						0						
1302.						0						
1303.						0						
	Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0						
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0						

	(	Ordinary	(	Credit Life		Group	In	dustrial		Total
	`			and Individual)		- ***				. 5 (6)
	1	2	3	4	5	6	7	8	9	10
			No. of Ind.		NIf					
	No.	Amount	Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND	110.	, anount		7 11100111	55.010.	7 41104111	110.	7 unount	110.	, another
MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year									0	0
17. Incurred during current year									0	0
Settled during current year:										
18.1 By payment in full									0	0
18.2 By payment on compromised claims. 18.3 Totals paid									0	0
18.3 Totals paid	0	0		0	0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year										
(Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year				(a)					0	0
21. Issued during year									0	0
22. Other changes to in force (Net)									0	0
23. In force December 31 of current year	0	0	0	(a)0	0	0	0	0	0	0

(a) Includes Individual Credit Life Insurance, prior year \$...........0 current year \$..........0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.........0 current year \$........0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$........0 current year \$........0.

	1	2	3	4	5
			Dividends Paid Or	Direct	
	Direct	Direct Premiums	Credited on Direct	Losses	Direct Losses
	Premiums	Earned	Business	Paid	Incurred
24. Group policies (b)					
24.1 Federal Employee Health Benefits Program premium (b)(b)					
24.2 Credit (group and individual)					
24.3 Collectively renewable policies (b)					
Other Individual Policies:		Y L			
25.1 Non-cancelable (b)					
OF O Consented and an acceptable (b)					
OF 2. New research is few stated as a series (h)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)		0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 2.4 + 25.6)		0	0	0	0

<sup>(</sup>b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

DIRECT BUSINESS IN THE STATE OF

NAIC Group Code.....0707

\* 6 0 3 2 1 2 0 0 8 2 0 6 3 2 NEW MEXICO DURING THE YEAR NAIC Company Code.....60321

#### LIFE INSURANCE

	LIFE INSURANCE											
		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total						
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	,	,	,								
1.	Life insurance					0						
2.	Annuity considerations					0						
3.	Deposit-type contract funds		XXX		XXX	0						
4.	Other considerations					0						
5.	Totals (Sum of Lines 1 to 4)	0	0	0	0	0						
	DIRECT DIVIDENDS TO POLICYHOLDERS				-	•						
	Life insurance:											
6.1	Paid in cash or left on deposit					0						
6.2	Applied to pay renewal premiums					0						
6.3	Applied to provide paid-up additions or shorten the endowment											
	or premium-paying period					0						
6.4	Other					0						
6.5	or premium-paying period		0	0	0	0						
	Annuities:											
7.1	Paid in cash or left on deposit					0						
7.2	Applied to provide paid-up annuities					0						
7.3	Other					0						
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0						
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0						
	DIRECT CLAIMS AND BENEFITS PAID											
9.	Death benefits					0						
10.	Matured endowments					0						
11.	Annuity benefits					0						
12.	Surrender values and withdrawals for life contracts					0						
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0						
14.	All other benefits, except accident and health					0						
15.	Totals	0	0	0	0	0						
			OF WRITE-INS									
1301		DETAILO	OF WRITE-ING			n						
1302.						0						
1303.						0						
	Summary of remaining write-ins for Line 13 from overflow page				0	0						
	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)			0	0	0						
.000.	Total Lines 1007 tilla 1000 pido 1000/Line 10 abovo/											

	(	Ordinary		Credit Life		Group	In	dustrial		Total
			(Group	and Individual)						
	1	2	3	4	5	6	7	8	9	10
			No. of Ind.							
			Pols. & Gr.		No. of					
	No.	Amount	Certifs.	Amount	Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND										
MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year									0	0
17. Incurred during current year									0	0
Settled during current year:										
18.1 By payment in full									0	0
19.2 By payment on compromised claims									0	0
18.3 Totals paid	0	0		0	0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year										
(Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year									0	0
21. Issued during year									0	0
22. Other changes to in force (Net)									0	0
23. In force December 31 of current year	0	0	0	(a)0	0	0	0	0	0	0

(a) Includes Individual Credit Life Insurance, prior year \$.........0 current year \$........0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$........0 current year \$........0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$.........0 current year \$........0.

	1	2	3	4	5
			Dividends Paid Or	Direct	
	Direct	Direct Premiums	Credited on Direct	Losses	Direct Losses
	Premiums	Earned	Business	Paid	Incurred
24. Group policies (b)					
24.1 Federal Employee Health Benefits Program premium (b)					
24.2 Credit (group and individual)					
24.3 Collectively renewable policies (b)					
24.3 Collectively renewable policies (b)					
Other Individual Policies:		Y L			
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)		0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 2.4 + 25.6)		0	0	0	0

<sup>(</sup>b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

6 0 3 2 1 2 0 0 8 2 0 6 2 NEVADA DURING THE YEAR

DIRECT BUSINESS IN THE STATE OF NAIC Group Code.....0707

NAIC Company Code.....60321

		LIFE INSUR	RANCE			
		1	2 Credit Life (Group and	3	4	5
		Ordinary	Individual)	Group	Industrial	Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance					0
2.	Annuity considerations					0
3.	Deposit-type contract funds		XXX		XXX	0
4.	Other considerations					0
5.	Totals (Sum of Lines 1 to 4)	0	0	0	0	0
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					0
6.3	Applied to provide paid-up additions or shorten the endowment					
	or premium-paying period					0
6.4	or premium-paying period					0
6.5	Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)		0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits					0
10.	Matured endowments					0
11.	Annuity benefits					0
12.	Surrender values and withdrawals for life contracts					0
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health					0
15.	Totals		0	0	0	0
			OF WRITE-INS			
1301		227,420				0

	(	Ordinary	(	Credit Life		Group	In	dustrial		Total
	`			and Individual)		· r				. 5 (6)
	1	2	3	4	5	6	7	8	9	10
			No. of Ind.		NIf					
	No.	Amount	Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND	110.	, anount		7 11100111	55.010.	7 41104111	110.	7 unount	110.	, another
MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year									0	0
17. Incurred during current year									0	0
Settled during current year:										
18.1 By payment in full									0	0
18.2 By payment on compromised claims. 18.3 Totals paid									0	0
18.3 Totals paid	0	0		0	0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year										
(Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year				(a)					0	0
21. Issued during year									0	0
22. Other changes to in force (Net)									0	0
23. In force December 31 of current year	0	0	0	(a)0	0	0	0	0	0	0

..0

.0

.0

Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$........ current year \$..........0.

1302.

1398. Summary of remaining write-ins for Line 13 from overflow page.

1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above).

	1	2	3	4	5
			Dividends Paid Or	Direct	
	Direct	Direct Premiums	Credited on Direct	Losses	Direct Losses
	Premiums	Earned	Business	Paid	Incurred
24. Group policies (b)					
24.1 Federal Employee Health Benefits Program premium (b)					
24.2 Credit (group and individual)					
24.3 Collectively renewable policies (b)					
Other Individual Policies:		Y L			
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)		0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 2.4 + 25.6)	0	0	0	0	0

<sup>(</sup>b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

\* 6 0 3 2 1 2 0 0 8 2 0 6 3 7 1 0 5 \*
OKLAHOMA DURING THE YEAR

DIRECT BUSINESS IN THE STATE OF

NAIC Group Code.....0707

NAIC Company Code.....60321

#### LIFE INSURANCE

	LIFE INSURANCE										
		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total					
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	O runnun y	arriada.j	O.Gup	aaaa.	10001					
1	Life insurance					0					
2	Annuity considerations					0					
3.	Deposit-type contract funds		XXX		XXX	0					
4.						0					
5.			0	0	0	0					
	DIRECT DIVIDENDS TO POLICYHOLDERS										
	Life insurance:										
6.1	Paid in cash or left on deposit					0					
6.2	Applied to pay renewal premiums					0					
6.3	Applied to provide paid-up additions or shorten the endowment										
	or premium-paying period					0					
6.4	Other					0					
6.5	or premium-paying period Other Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0					
	Annuities:										
7.1	Paid in cash or left on deposit					0					
7.2	Applied to provide paid-up annuities					0					
7.3	Other					0					
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0					
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0					
	DIRECT CLAIMS AND BENEFITS PAID										
9.	Death benefits					0					
10.	Matured endowments					0					
11.	Annuity benefits					0					
12.	Surrender values and withdrawals for life contracts					0					
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0					
14.	All other benefits, except accident and health					0					
15.	Totals	0	0	0	0	0					
		DETAILS (	OF WRITE-INS								
1301						0					
1302						0					
1303						0					
1398	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0					
	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)		0	0	0	0					

	(	Ordinary		Credit Life		Group	In	dustrial		Total
			(Group	and Individual)				-		
	1	2	3	4	5	6	7	8	9	10
			No. of Ind.							
			Pols. & Gr.		No. of					
	No.	Amount	Certifs.	Amount	Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND										
MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year									0	0
17. Incurred during current year									0	0
Settled during current year:										
18.1 By payment in full									0	0
18.2 By payment on compromised claims.			<u></u>		<u></u>				0	0
18.1 By payment in full	0	0		0	<u></u> 0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements		0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year										
(Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year									0	0
21. Issued during year									0	0
22. Other changes to in force (Net)									0	0
23. In force December 31 of current year	0	0	0	(a)0	0	0	0	0	0	0

(a) Includes Individual Credit Life Insurance, prior year \$.........0 current year \$........0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$........0 current year \$........0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$.........0 current year \$........0.

ACCIDE			AIICL		
	1	2	3	4	5
			Dividends Paid Or	Direct	
	Direct	Direct Premiums	Credited on Direct	Losses	Direct Losses
	Premiums	Earned	Business	Paid	Incurred
24. Group policies (b)					
24.1 Federal Employee Health Benefits Program premium (b)					
24.2 Credit (group and individual)					
24.3 Collectively renewable policies (b)					
Other Individual Policies:	IVOI	YL			
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)		0	0	0	0
26 Totals (Lines 24 + 24 1 + 24 2 + 24 3 + 2 4 + 25 6)	0	0	1 0	1 0	1 (

<sup>(</sup>b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

DIRECT BUSINESS IN THE STATE OF

NAIC Group Code.....0707

\* 6 0 3 2 1 2 0 0 8 2 0 6 3 9
PENNSYLVANIA DURING THE YEAR
NAIC Company Code.....60321

#### LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	Ordinary	iliulviuuai)	Group	iliuustilai	I Olai
1				3.667		3.667
	Life insurance			3,007		
2.	Annuity considerations					0
3.	Deposit-type contract funds		XXX		XXX	0
4.	Other considerations					0
5.	Totals (Sum of Lines 1 to 4)	0	0	3,667	0	3,667
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
	. +					0
6.3	Applied to provide paid-up additions or shorten the endowment					
	or premium-paying period					0
	Other					0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)		0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID	-	-			-
9.	Death benefits					0
10.	Matured endowments					0
	Annuity benefits					0
	Surrender values and withdrawals for life contracts.					0
	Aggregate write-ins for miscellaneous direct claims and benefits paid			0	0	0
	All other benefits, except accident and health					0
	Totals	0		0	0	
13.	Totals				0	
1001			OF WRITE-INS		<u> </u>	1
1301.						0
1302.						0
						0
	Summary of remaining write-ins for Line 13 from overflow page			0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	(	Ordinary		Credit Life		Group		dustrial		Total
			(Group	and Individual)	_		_			
	1	2	3	4	5	6	7	8	9	10
			No. of Ind.							
			Pols. & Gr.		No. of					
	No.	Amount	Certifs.	Amount	Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND										
MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year		2,540			2	7,620			2	10,160
17. Incurred during current year									0	0
Settled during current year:										
18.1 By payment in full									0	0
18.1 By payment in full									0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year										
(Lines 16 + 17 - 18.6)	0	2,540	0	0	2	7,620	0	0	2	10,160
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	1	25,000		(a)	304	34,187,088			305	34,212,088
21. Issued during year									0	0
22. Other changes to in force (Net)					(205)	(19,839,726)			(205)	(19,839,726)
23. In force December 31 of current year	1	25,000	0	(a)0	99	14,347,362	0	0	100	14,372,362

(a) Includes Individual Credit Life Insurance, prior year \$.........0 current year \$........0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$........0 current year \$........0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$.........0 current year \$........0.

	1	2	3	4	5
			Dividends Paid Or	Direct	
	Direct	Direct Premiums	Credited on Direct	Losses	Direct Losses
	Premiums	Earned	Business	Paid	Incurred
24. Group policies (b)					
24.1 Federal Employee Health Benefits Program premium (b)					
24.2 Credit (group and individual)					
24.3 Collectively renewable policies (b)					
Other Individual Policies:		<b>Y</b>			
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)		0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 2.4 + 25.6)	0	0	0	0	0

<sup>(</sup>b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

## \* 6 0 3 2 1 2 0 0 8 2 0 6 4 1 1 DIRECT BUSINESS IN THE STATE OF SOUTH CAROLINA DURING THE YEAR

NAIC Group Code.....0707

NAIC Company Code.....60321

#### LIFE INSURANCE

	<u>L</u>		ANGL			
		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	,				
1	Life insurance					0
2.	Annuity considerations					0
3.	Deposit-type contract funds				XXX	0
4.	Other considerations					0
5.	Totals (Sum of Lines 1 to 4)		0	0	0	0
- O.	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2						0
-	Applied to provide paid-up additions or shorten the endowment					
0.0	or premium-paying period					0
6.4	Other	RICAR				٥
6.5	or premium-paying period Other		0	0	n	٥
0.5	Annuities:					
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits					0
10.	Matured endowments					0
11.	Annuity benefits					0
12.	Surrender values and withdrawals for life contracts					0
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0
14.	All other benefits, except accident and health					0
15.	Totals	0	0	0	0	0
	<u> </u>	DETAILS (	OF WRITE-INS			
1301.		DE:AILO				
1302						0
						٥
	Summary of remaining write-ins for Line 13 from overflow page			0	0	
1399	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	
1000.	- 10tal (Ellico 1001 tilla 1000 pias 1000)(Ellic 10 above)					

	(	Ordinary	(	Credit Life		Group	Inc	dustrial		Total
			(Group	and Individual)						
	1	2	3	4	5	6	7	8	9	10
			No. of Ind.							
	NI-	A 4	Pols. & Gr.	A 4	No. of	A	NI-	A 4	NI-	A t
DIDEAT DEATH DENESTO AND	No.	Amount	Certifs.	Amount	Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND										
MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year									0	0
17. Incurred during current year									0	0
Settled during current year:										
18.1 By payment in full									0	0
18.2 By payment on compromised claims.									0	0
18.2 By payment on compromised claims. 18.3 Totals paid	0	0		0	<u></u> .0	0	0	0	0	0
18.4 Reduction by compromise					<u></u>				0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year										
(Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year				(a)					0	0
21. Issued during year									0	0
22. Other changes to in force (Net)									0	0
23. In force December 31 of current year	0	0	0	(a)0	0	0	0	0	0	0

(a) Includes Individual Credit Life Insurance, prior year \$.........0 current year \$........0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$........0 current year \$........0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$.........0 current year \$........0.

ACCIDE			ANCL		
	1	2	3	4	5
			Dividends Paid Or	Direct	
	Direct	Direct Premiums	Credited on Direct	Losses	Direct Losses
	Premiums	Earned	Business	Paid	Incurred
24. Group policies (b)					
24.1 Federal Employee Health Benefits Program premium (b)					
24.2 Credit (group and individual)					
24.3 Collectively renewable policies (b)					
Other Individual Policies:	IVOI	YL			
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)		0	0	0	0
26 Totals (Lines 24 + 24 1 + 24 2 + 24 3 + 2 4 + 25 6)	0	0	1 0	1 0	1 (

<sup>(</sup>b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

DIRECT BUSINESS IN THE STATE OF

NAIC Group Code.....0707

\* 6 0 3 2 1 2 0 0 8 2 0 6 4 2 1 SOUTH DAKOTA DURING THE YEAR NAIC Company Code.....60321

#### LIFE INSURANCE

		LILE INOOL	MINCE			
		1	2 Credit Life (Group and	3	4	5
		Ordinary	Individual)	Group	Industrial	Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance					0
2.	Annuity considerations					0
3.	Deposit-type contract funds		XXX		XXX	0
4.	Other considerations					0
5.	Totals (Sum of Lines 1 to 4)	0	0	0 .	0	0
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					0
6.3	Applied to provide paid-up additions or shorten the endowment					
	or premium-paying period					0
6.4	Other					0
6.5	or premium-paying period Other Totals (Sum of Lines 6.1 to 6.4)		0	0 .	0	0
	Annuities:					
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0 .	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0 .	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits					0
10.	Matured endowments					0
11.	Annuity benefits					0
12.	Surrender values and withdrawals for life contracts					0
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0
14.	All other benefits, except accident and health					0
15	Totals		0	0	0	0
			OF WRITE-INS			
1301		DETAILS	OF WINITE-INS			0
1301						0
						0
1303						0
	Summary of remaining write-ins for Line 13 from overflow page		0		0	0
1399	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	00	0 .	0	0

	(	Ordinary		Credit Life and Individual)		Group	Ind	dustrial		Total
	1	2	3	4	5	6	7	8	9	10
			No. of Ind. Pols. & Gr.		No. of					
	No.	Amount	Certifs.	Amount	Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND										
MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year									0	0
17. Incurred during current year									0	0
Settled during current year:										
18.1 By payment in full									0	0
40 0 D					<u></u>				0	0
18.2 By payment on compromised claims. 18.3 Totals paid	0	0		0	<u></u> 0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year										
(Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year				(a)					0	0
21. Issued during year									0	0
22. Other changes to in force (Net)									0	0
23. In force December 31 of current year				(a)0	0	0	0	0	0	0

(a) Includes Individual Credit Life Insurance, prior year \$.........0 current year \$........0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$........0 current year \$........0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$.........0 current year \$........0.

	1	2	3	4	5
			Dividends Paid Or	Direct	
	Direct	Direct Premiums	Credited on Direct	Losses	Direct Losses
	Premiums	Earned	Business	Paid	Incurred
24. Group policies (b)					
24.1 Federal Employee Health Benefits Program premium (b)					
24.2 Credit (group and individual)					
24.3 Collectively renewable policies (b)					
Other Individual Policies:		<b>Y</b>			
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)		0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 2.4 + 25.6)	0	0	0	0	0

<sup>(</sup>b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

\* 6 0 3 2 1 2 0 0 8 2 0 6 4 3 TENNESSEE DURING THE YEAR

DIRECT BUSINESS IN THE STATE OF

NAIC Group Code.....0707

NAIC Company Code.....60321

#### LIFE INSURANCE

		1	2	3	1	5
		ı	Credit Life (Group and		4	J
		Ordinary	Individual)	Group	Industrial	Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance					0
2.	Annuity considerations					0
3.	Deposit-type contract funds		XXX		XXX	0
4.	Other considerations					0
5.		0	0 .	0 .	0	0
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					0
6.3						
	or premium-paying period					0
6.4						0
6.5	Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0 .	0 .	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0 .	0 .	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits					0
10.	Matured endowments					0
11.	Annuity benefits					0
12.	Surrender values and withdrawals for life contracts					0
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0 .	0	0	0
14.	All other benefits, except accident and health					0
15.	Totals	0	0 .	0 .	0	0
		DETAILS C	F WRITE-INS	<u> </u>		
1301						0
1302						0
1303						0
1398	Summary of remaining write-ins for Line 13 from overflow page	0	0 .		0	0
	. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)				0	0

	(	Ordinary		Credit Life		Group	In	dustrial		Total
			(Group	and Individual)				-		
	1	2	3	4	5	6	7	8	9	10
			No. of Ind.							
			Pols. & Gr.		No. of					
	No.	Amount	Certifs.	Amount	Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND										
MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year									0	0
17. Incurred during current year									0	0
Settled during current year:										
18.1 By payment in full									0	0
18.2 By payment on compromised claims.			<u></u>		<u></u>				0	0
18.1 By payment in full	0	0		0	<u></u> 0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements		0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year										
(Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year									0	0
21. Issued during year									0	0
22. Other changes to in force (Net)									0	0
23. In force December 31 of current year	0	0	0	(a)0	0	0	0	0	0	0

(a) Includes Individual Credit Life Insurance, prior year \$.........0 current year \$........0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$........0 current year \$........0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$.........0 current year \$........0.

	1	2	3	4	5
			Dividends Paid Or	Direct	
	Direct	Direct Premiums	Credited on Direct	Losses	Direct Losses
	Premiums	Earned	Business	Paid	Incurred
24. Group policies (b)					
24.1 Federal Employee Health Benefits Program premium (b)					
24.2 Credit (group and individual)					
24.3 Collectively renewable policies (b)					
24.3 Collectively renewable policies (b)					
Other Individual Policies:		Y L			
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)		0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 2.4 + 25.6)		0	0	0	0

<sup>(</sup>b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

\* 6 0 3 2 1 2 0 0 8 2 0 6 4
DIRECT BUSINESS IN THE STATE OF TEXAS DURING THE YEAR

NAIC Group Code.....0707

NAIC Company Code.....60321

#### LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	Ordinary	iliulviduai)	Group	IIIuusiilai	Total
1	Life insurance					0
2.	Annuity considerations					0
3.	Deposit-type contract funds		XXX		XXX	
4	Other considerations					
5		0		Λ		
5.	DIRECT DIVIDENDS TO POLICYHOLDERS	U .		0		0
	Life insurance:					
C 4						
6.1	Paid in cash or left on deposit					0
6.2	LL L. 7					0
6.3	Applied to provide paid-up additions or shorten the endowment					
C 4	or premium-paying period					0
6.4	or premium-paying period. Other. Totals (Sum of Lines 6.1 to 6.4)					0
6.5			0	0	0	0
- 4	Annuities:					
7.1	Paid in cash or left on deposit					0
7.2	Proceedings of the control of the co					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
9.	DIRECT CLAIMS AND BENEFITS PAID  Death benefits					0
10.	Matured endowments					0
11.	Annuity benefits					0
12.	Surrender values and withdrawals for life contracts					0
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health					0
15.	Totals	0	0	0	0	0
		DETAILS (	OF WRITE-INS	Į.		
1301.						0
1302						0
						0
	Summary of remaining write-ins for Line 13 from overflow page			0	0	0
	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)				0	0

	(	Ordinary		Credit Life		Group	In	dustrial		Total
			(Group	and Individual)				-		
	1	2	3	4	5	6	7	8	9	10
			No. of Ind.							
			Pols. & Gr.		No. of					
	No.	Amount	Certifs.	Amount	Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND										
MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year									0	0
17. Incurred during current year									0	0
Settled during current year:										
18.1 By payment in full									0	0
18.2 By payment on compromised claims.			<u></u>		<u></u>				0	0
18.1 By payment in full	0	0		0	<u></u> 0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements		0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year										
(Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year									0	0
21. Issued during year									0	0
22. Other changes to in force (Net)									0	0
23. In force December 31 of current year	0	0	0	(a)0	0	0	0	0	0	0

(a) Includes Individual Credit Life Insurance, prior year \$.........0 current year \$........0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.......0 current year \$.......0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$.......0 current year \$.......0.

	1	2	3	4	5
			Dividends Paid Or	Direct	
	Direct	Direct Premiums	Credited on Direct	Losses	Direct Losses
	Premiums	Earned	Business	Paid	Incurred
24. Group policies (b)					
24.1 Federal Employee Health Benefits Program premium (b)(b)					
24.2 Credit (group and individual)					
24.3 Collectively renewable policies (b)					
Other Individual Policies:		Y L			
25.1 Non-cancelable (b)					
OF O Consented and an acceptable (b)					
OF 2. New research is few stated as a series (h)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)		0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 2.4 + 25.6)		0	0	0	0

<sup>(</sup>b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

\* 6 0 3 2 1 2 0 0 8 2 0 6 DIRECT BUSINESS IN THE STATE OF UTAH DURING THE YEAR

NAIC Group Code.....0707 NAIC Company Code.....60321

LIEE INCLIDANCE

	LIFE INSURANCE											
		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total						
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		·	·								
1.	Life insurance					0						
2.	Annuity considerations					0						
3.	Deposit-type contract funds		XXX		XXX	0						
4.	Other considerations					0						
5.	Totals (Sum of Lines 1 to 4)	0	0	0	0	0						
	DIRECT DIVIDENDS TO POLICYHOLDERS											
	Life insurance:											
6.1	Paid in cash or left on deposit					0						
6.2	Applied to pay renewal premiums					0						
6.3	Applied to provide paid-up additions or shorten the endowment											
	or premium-paying period					0						
6.4	Other	$\mathbf{N}(\mathbf{A})$				0						
6.5	Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0						
	Annuities:											
7.1	Paid in cash or left on deposit					0						
7.2	Applied to provide paid-up annuities					0						
7.3	Other					0						
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0						
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0						
	DIRECT CLAIMS AND BENEFITS PAID											
9.	Death benefits					0						
10.	Matured endowments					0						
11.	Annuity benefits					0						
12.	Surrender values and withdrawals for life contracts					0						
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0						
14.	All other benefits, except accident and health					0						
15.	Totals	0	0	0	0	0						
		DETAILS	OF WRITE-INS									
1301.						0						
1302.						0						
1202												

	(	Ordinary		Credit Life and Individual)		Group	In	dustrial		Total
	1	2	3	4	5	6	7	8	9	10
			No. of Ind.			-				-
			Pols. & Gr.		No. of					
	No.	Amount	Certifs.	Amount	Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND										
MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year									0	0
17. Incurred during current year									0	0
Settled during current year:										
18.1 By payment in full									0	0
18.2 By payment on compromised claims.			<u></u>						0	0
18.1 By payment in full	0	0		0	0	0	0	0	0	0
18.4 Reduction by compromise				V ()					0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
<ol><li>Unpaid Dec. 31, current year</li></ol>										
(Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year				(a)					0	0
21. Issued during year									0	0
22. Other changes to in force (Net)									0	0
23. In force December 31 of current year	0	0	0	(a)0	0	0		0	0	0

(a) Includes Individual Credit Life Insurance, prior year \$.........0 current year \$........0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$........0 current year \$........0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$.........0 current year \$........0.

1398. Summary of remaining write-ins for Line 13 from overflow page... 1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)...

	1	2	2	1	5
	ı	2	Dividends Paid Or	Direct	J
	D'and	D'and Danis' and		Direct	D'
	Direct	Direct Premiums	Credited on Direct	Losses	Direct Losses
	Premiums	Earned	Business	Paid	Incurred
24. Group policies (b)					
24.1 Federal Employee Health Benefits Program premium (b)					
24.2 Credit (group and individual)					
24.3 Collectively renewable policies (b)					
Other Individual Policies:		<b>Y</b>			
25.1 Non-cancelable (b)					
OF O Comments and announce last (h)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)		0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 2.4 + 25.6)	0	0	0	0	0

<sup>(</sup>b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

\* 6 0 3 2 1 2 0 0 8 2 0 6 4 7 1 0 5 \*
VIRGINIA DURING THE YEAR

DIRECT BUSINESS IN THE STATE OF

NAIC Group Code.....0707

NAIC Company Code.....60321

#### LIFE INSURANCE

		LIFE INSUR	AIICL			
		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	0.0		0.004		
1	Life insurance			350.077		350.077
2.	Annuity considerations					0
3.	Deposit-type contract funds				XXX	0
4.	Other considerations					0
5.	Totals (Sum of Lines 1 to 4)		0			350.077
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					0
6.3	Applied to provide paid-up additions or shorten the endowment					
	or premium-paying period					0
6.4	Other					0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)		0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits			196,767		196,767
10.	Matured endowments					0
11.	Annuity benefits					0
12.	Surrender values and withdrawals for life contracts					0
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health					0
15.	Totals	0	0	196,767	0	196,767
			OF WRITE-INS			<u> </u>
1301			OF WIGHTE-ING			0
						0
						n
	Summary of remaining write-ins for Line 13 from overflow page			0	0	0
	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)				0	n

	Ordinary			Credit Life and Individual)		Group	Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
			No. of Ind. Pols. & Gr.		No. of					
	No.	Amount	Certifs.	Amount	Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND										
MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year					11	282,416			11	282,416
17. Incurred during current year					5	180,556			5	180,556
Settled during current year:										
18.1 By payment in full									0	0
18.2 By payment on compromised claims.									0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year										
(Lines 16 + 17 - 18.6)	0	0	0	0	16	462,972	0	0	16	462,972
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year									462	45,297,982
21. Issued during year									0	0
22. Other changes to in force (Net)					(272)	(26,323,757)			(272)	(26,323,757)
23. In force December 31 of current year	1	10,000	0	(a)0	189	18,964,225	0	0	190	18,974,225

(a) Includes Individual Credit Life Insurance, prior year \$.........0 current year \$........0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.......0 current year \$.......0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$.......0 current year \$.......0.

	1	2	3	4	5
			Dividends Paid Or	Direct	
	Direct	Direct Premiums	Credited on Direct	Losses	Direct Losses
	Premiums	Earned	Business	Paid	Incurred
24. Group policies (b)					
24.1 Federal Employee Health Benefits Program premium (b)					
24.2 Credit (group and individual)					
24.3 Collectively renewable policies (b)					
Other Individual Policies:		Y L			
25.1 Non-cancelable (b)					
OF O Commentered announced to (h)					
OF 2. New years while for stated assessments (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)		0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 2.4 + 25.6)		0	0	0	0

<sup>(</sup>b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

DIRECT BUSINESS IN THE STATE OF

\* 6 0 3 2 1 2 0 0 8 2 0 6 4 9 WEST VIRGINIA DURING THE YEAR

NAIC Group Code.....0707

NAIC Company Code.....60321

#### LIFE INSURANCE

			/ \\			
		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	Ordinary	marriadarj	Огоар	maaana	Total
1	Life insurance			53.169		53.169
2.	Annuity considerations					0
3.	Deposit-type contract funds		XXX		XXX	0
4	•					0
5	Totals (Sum of Lines 1 to 4)		0	53,169	0	53.169
- O.	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					0
6.3	Applied to provide paid-up additions or shorten the endowment					
0.0	or premium-paying period					0
6.4	Other					Λ
6.5	Totals (Sum of Lines 6.1 to 6.4)		0	Λ	Λ	٥
0.5	Annuities:			0	0	0
7.1	Paid in cash or left on deposit					0
7.1	Applied to provide paid-up annuities					
7.3	Other					٥
7.4	Totals (Sum of Lines 7.1 to 7.3)		0	Λ	0	٥
8.		0		0	٥	٥
0.	DIRECT CLAIMS AND BENEFITS PAID			0	U	
9.	Death benefits			78.106		78.106
10.	Matured endowments.			-,		70,100
11.	Annuity benefits					٥
12.	Surrender values and withdrawals for life contracts					٥
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid				0	٥
14.	All other benefits, except accident and health				•	0
15.	Totals			70 106		78,106
15.	Totals			70,100	0	
	1		OF WRITE-INS	<del></del>		
1301.						0
						0
1303.						0
	Summary of remaining write-ins for Line 13 from overflow page			0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary			Credit Life and Individual)		Group		dustrial	Total	
	1	2	3	4	5	6	7	8	9	10
			No. of Ind. Pols. & Gr.		No. of					
	No.	Amount	Certifs.	Amount	Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND										
MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year					6	196,825			6	196,825
17. Incurred during current year					4	71,671			4	71,671
Settled during current year:										
18.1 By payment in full									0	0
18.1 By payment in full									0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0		0			0	0
19. Unpaid Dec. 31, current year										
(Lines 16 + 17 - 18.6)	0	0	0	0	10	268,496	0	0	10	268,496
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	1	10,000		(a)	225	21,412,217				
21. Issued during year									0	0
21. Issued during year22. Other changes to in force (Net)					(128)	(12,421,853)			(128)	(12,421,853)
23. In force December 31 of current year	1	10,000	0	(a)0	97	8,990,364	0	0		

(a) Includes Individual Credit Life Insurance, prior year \$.........0 current year \$........0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$........0 current year \$........0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$.........0 current year \$........0.

	1	2	3	4	5
			Dividends Paid Or	Direct	
	Direct	Direct Premiums	Credited on Direct	Losses	Direct Losses
	Premiums	Earned	Business	Paid	Incurred
24. Group policies (b)					
24.1 Federal Employee Health Benefits Program premium (b)					
24.2 Credit (group and individual)					
24.3 Collectively renewable policies (b)					
Other Individual Policies:		Y L			
25.1 Non-cancelable (b)					
OF O Commentered announced to (h)					
OF 2. New years while for stated assessments (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)		0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 2.4 + 25.6)		0	0	0	0

<sup>(</sup>b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

# **NONE**